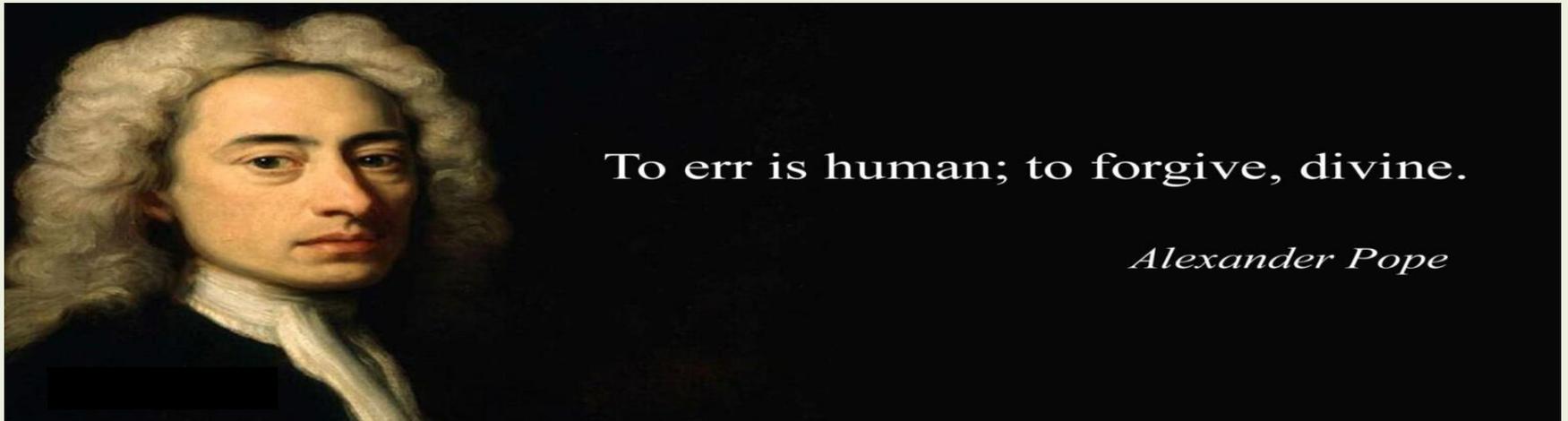


HOSPITAL Patient Safety Goals



To Err Is Human

Building a Safer Health System is a landmark report issued in November 1999 by the U.S. Institute of Medicine that may have resulted in increased awareness of U.S. medical errors.



Patient Safety Advisory Group

Comprised of a panel of widely recognized patient safety experts, including nurses, physicians, pharmacists, risk managers, clinical engineers, and other professionals with hands-on experience in addressing patient safety issues in a wide variety of healthcare settings.



Joint Commission

The Joint Commission is a United States-based nonprofit tax-exempt 501 organization that accredits more than 22,000 US health care organizations and programs.





The Joint Commission

Joint Commission Accreditation

Joint Commission accreditation is **the objective evaluation process that can help health care organizations measure, assess, and improve performance in order to provide safe, high quality care for their patients.** Accreditation is awarded upon successful completion of an on-site survey.



Joint Commission International (JCI)

The international branch of the Joint Commission accredits medical services from around the world.

International Patient Safety Goals (IPSGs) help accredited organizations address specific areas of concern in some of the most problematic areas of patient safety.



Joint Commission International (JCI)

The International Patient Safety Goals (IPSG) were developed in **2006** by the Joint Commission International (JCI).

2017–2023 versions

Goal 1: Identify patients correctly.

Goal 2: Improve effective communication.

Goal 3: Improve the safety of high-alert medications.

Goal 4: Ensure safe surgery.

Goal 5: Reduce the risk of health care-associated infections.

Goal 6: Reduce the risk of patient harm resulting from falls.



Goal 1

Improve the accuracy of patient identification

Applies to: Ambulatory, Behavioral Health Care, Critical Access Hospital, Home Care, Hospital, Laboratory, Nursing Care Center, Office-Based Surgery



Wristbands

أساور المستشفى



Wristbands

أساور المستشفى



Wristbands

أساور المستشفى



Different for different meanings

Wristbands

أساور المستشفى

Medical Alert Wristbands (Bracelets)

RED

Red-labeled color-coded medical bracelets feature the letter “**A**”, which stands for “**allergy**”



Wristbands

أساور المستشفى

YELLOW

A yellow wristband with the letter **“F”** signifies a **F**all Risk.



Wristbands

أساور المستشفى

PURPLE

A purple wristband with the letters “DNR” stands for “Do Not Resuscitate” and shows that a patient has made the decision for his or her\ end-of-life care to not be resuscitated



Wristbands

أساور المستشفى

PINK

A pink-labeled bracelet featuring the letters “**RE**” alerts hospital staff to a “**R**estricted **E**xtremity”.



Wristbands

أساور المستشفى

PINK

1. A 'limb alert' bracelet will be applied to the affected limb **upon admission** or **at point of service**, determining that an extremity has been deemed restricted.
2. No laboratory venous draws, no Intravenous (IV) starts, and no blood pressures are to be performed on the affected limb.



Wristbands

أساور المستشفى

GREEN

Green-labeled bracelets have the letter “**L**” and show that the patient has a **latex allergy**.





Six types of wristband errors:⁴

- Absent wristband
- Wrong wristband (i.e., another patient's wristband)
- More than one wristband (wristbands contain conflicting information)
- Partially missing information on wristband
- Partially erroneous information on wristband
- Illegible identification information on wristband





Goal 2

Improve the effectiveness
of **communication** among
caregivers

Applies to: Critical Access Hospital, Hospital, Laboratory



Goal 2

It is recommended that verbal and telephone orders should be written down when received and read back to the individual providing the information.

The hospital should have a **consistent and complete handover process** for transitions within the hospital.



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





Prevent

LASA



Clear Label



Clear Label

Jonathan Cash Doe

**Hydralazine
25 mg**



Take
2 pills in the morning,
2 pills at noon,
2 pills in the evening, and
2 pills at bedtime.



**For:
Blood Pressure**

Warnings

May cause dizziness.
May cause nausea.
Take with food.

DOB: 03/19/1958

Rx # 5483-3921-3345

Provider: A. Mohan

NDC: 417-25529-00

Filled: 05/31/2011

Expires: 10/08/2011

Refill: 3 Refills

120 Pills



**Morning
(6am–8am)**

**2
pills**



**Noon
(11am–1pm)**

**2
pills**



**Evening
(4pm–6pm)**

**2
pills**



**Bedtime
(9pm–11pm)**

**2
pills**

LOGO
SPACE

PRXpharmacy
Phone Number: 617-665-1000
90 Frasier Ave, Chattanooga, TN 27405



Verify all medication both verbally and visually

DataRay Outpatient Pharmacy Solutions
www.datarayusa.com 1-800-477-5317

DEMO, PATIENT 1234
PROzac 20MG (FLUOXETINE) TAB,SA
Rx 365575 RHM #30 CAP



Call your doctor for medical
advice about side effects. You
may report side effects to FDA
at 1-800-FDA-1088

SAMPLE

TAKE 1 TABLET BY MOUTH AT
BEDTIME FOR ONE MONTH THEN
INCREASE BY 1 TABLET EACH MONTH
UNTIL TAKING 4 TABLETS.

KEEP OUT OF REACH OF CHILDREN

Caution: Federal law prohibits transfer of this drug to any person other than patient for whom prescribed.



Verify all medication both verbally and visually





Goal 3

Improve the safety of high-alert medications

Applies to: Ambulatory, Critical Access Hospital, Hospital, Office Based Surgery, Nursing Care Center



Goal 3

High-alert medications are drugs that bear a heightened risk of causing significant patient harm when they are used in error.

Although mistakes may or may not be more common with these drugs, the consequences of an error are clearly more devastating to patients.



Goal 3

Examples

Insulin,

Opioids,

Neuromuscular blocking agents,

Anticoagulants



Goal 3

1. Standardizing the ordering, storage, preparation, and administration of these medications.
2. Improving access to information about these drugs.
3. Limiting access to high-alert medications.
4. Using auxiliary labels and automated alerts.



Goal 3

Applies only to hospitals that provide anticoagulant therapy and/or long-term anticoagulation prophylaxis

Reduce the likelihood of patient harm associated with the use of anticoagulant therapy



Record and pass along correct information about a patient's medicine





Goal 4

Ensure safe surgery

**Eliminate wrong patient, wrong site,
wrong procedure**

Applies to: Critical Access Hospital, Hospital





Prevent

Wrong patient

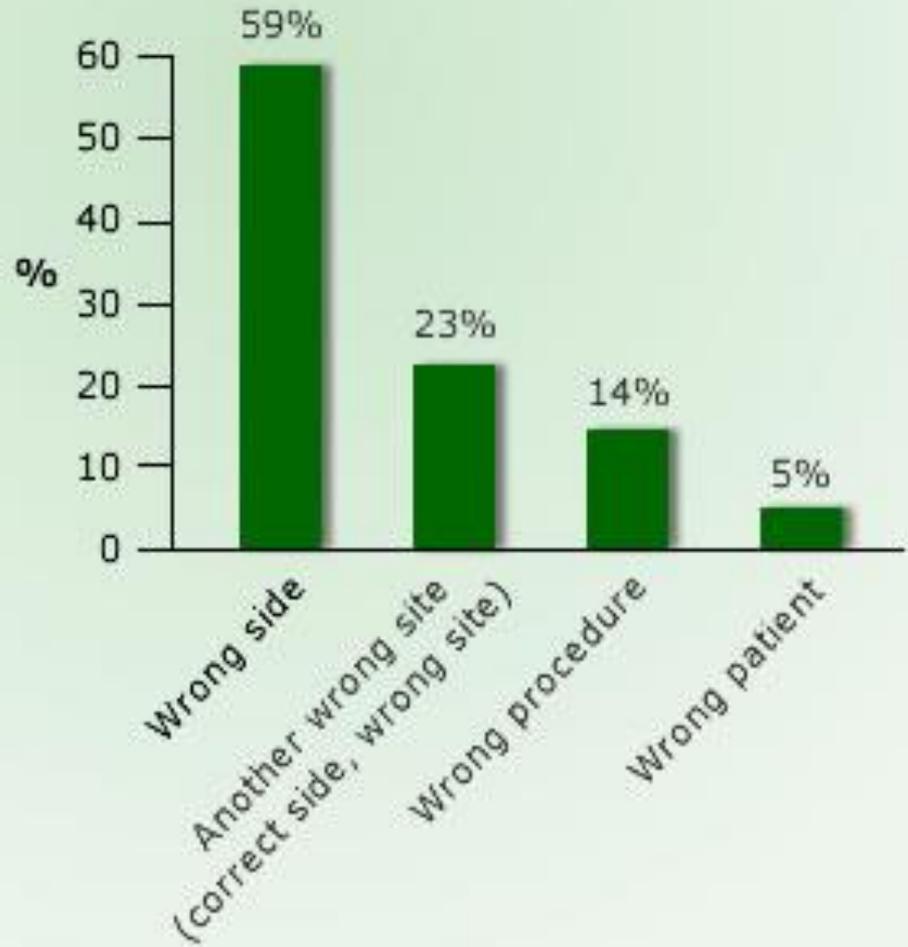
Wrong Site.....

Wrong Surgery





Types of wrong-site surgery observed in the previous 6 months by orthopedic surgeons



2019



Goal 4

1. Briefing. **Before list** or each patient (if different staff for each patient, e.g emergency list).
2. Sign-in. **Before induction** of anaesthesia.
3. Timeout. **Before incision** (stop moment)
4. Sign out. ... **Debriefing**



Goal 4

Example

Sign in commences prior to the anaesthetic being administered in the anaesthetic room.

The team introduces themselves, risks and concerns are highlighted.

Patient details are checked, the type of surgery, consent, allergy status, any risks of bleeding are identified, and venous thromboembolic prophylaxis is addressed





Prof. Ashraf Zaghloul





Goal 5

Reduce the risk of health care associated infections

Applies to: Ambulatory, Behavioral Health Care, Critical Access Hospital, Home Care, Hospital, Laboratory, Nursing Care Center, Office-Based Surgery



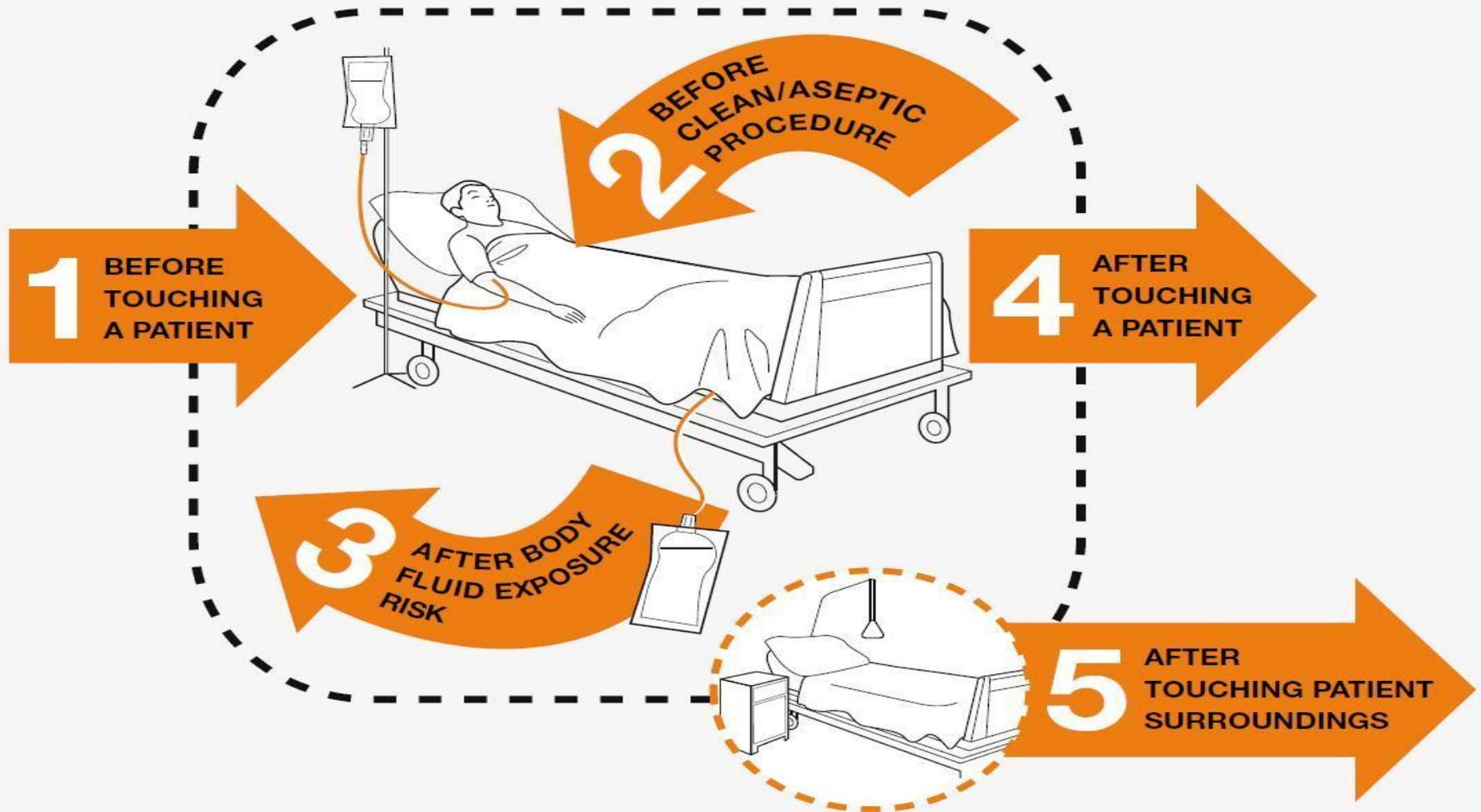
Goal 5

Proper use of **personal protective equipment** (e.g., gloves, masks, gowns), **aseptic technique**, **hand hygiene**, and **environmental infection control measures** are primary methods to protect the patient from transmission of microorganisms from another patient and from the health care worker.

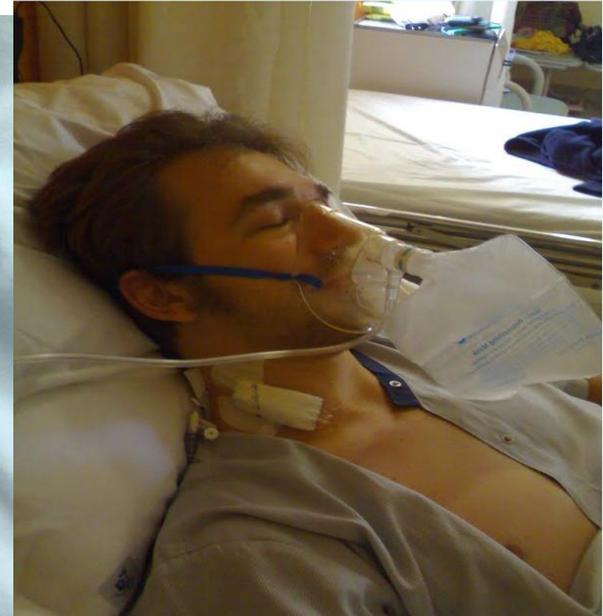




The five moments for hand hygiene in health care



Prevent blood infection from central lines

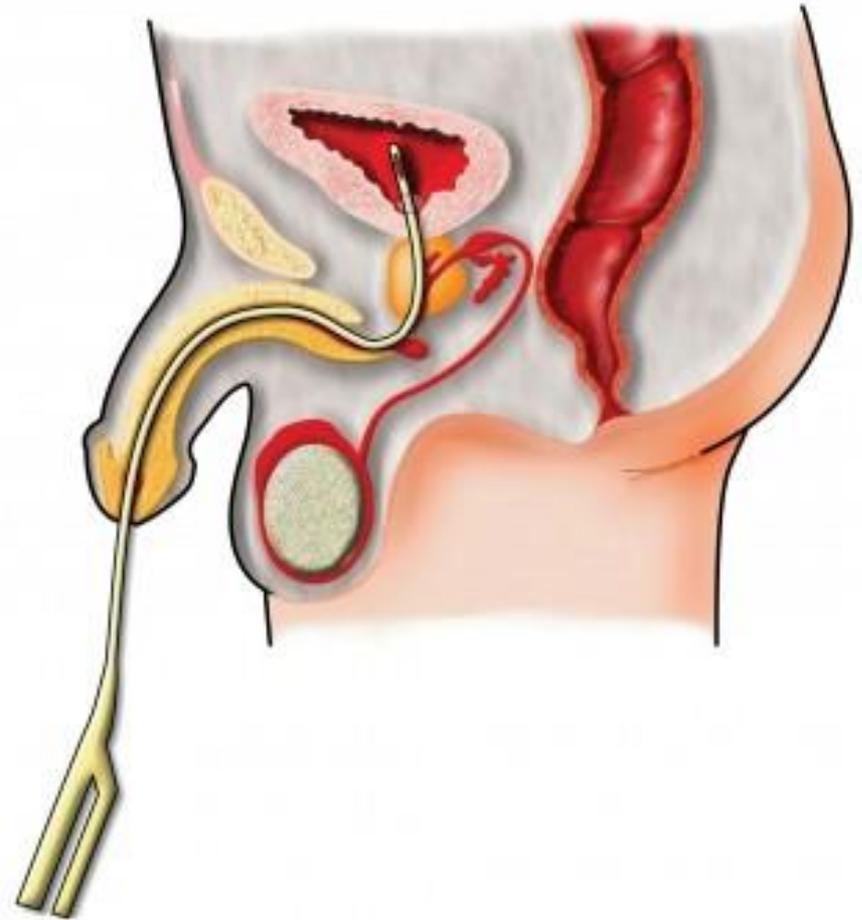
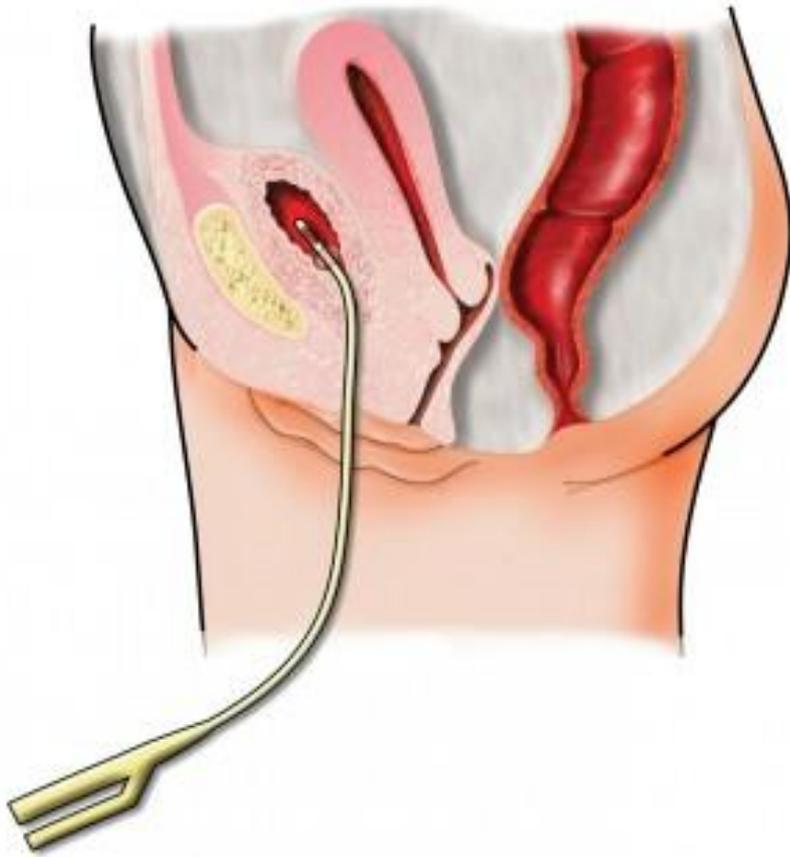


Prevent urinary tract catheter infection



Catheter-associated urinary tract infections (UTIs) are reportedly the most common hospital-acquired infections in hospitals

Prevent urinary tract catheter infection



Goal 5

**Reduce the risk of
health care-associated infections**

Applies to: Critical Access Hospital, Hospital







Goal 6

**Reduce the risk of patient harm
resulting from falls**

Reduce Falls

Applies to: Home Care, Nursing Care Center



Goal 6

1. Assess patient's fall risk upon admission, change in status, transfer to another unit and discharge.
2. Assign the patient to a bed that enables the patient to exit toward his/her stronger side whenever possible.





Goal 6

Fall Response Team

Fall Response Teams are comprised of interdisciplinary team members that are activated following a fall to evaluate circumstances surrounding a fall with the goal of reducing risk factors and preventing a repeat fall. This team examines the environment, equipment, fall program elements, and resources including staffing, surveillance, communications, and knowledge of risk factors that may have contributed to the event. The Team makes immediate recommendations to reduce fall risks for an individual patient.



Fall Response Team





National Patient Safety Goals



National Patient Safety Goal

Use alarms safely

Make improvements to ensure that alarms on medical equipment are heard and responded to on time

Applies to: Critical Access Hospital, Hospital





National Patient Safety Goal

Medication Reconciliation المصالحة مع الدواء

Applies to: Ambulatory health care, behavioral health care, critical access hospitals, hospital, home care, long term care, and office-based surgery



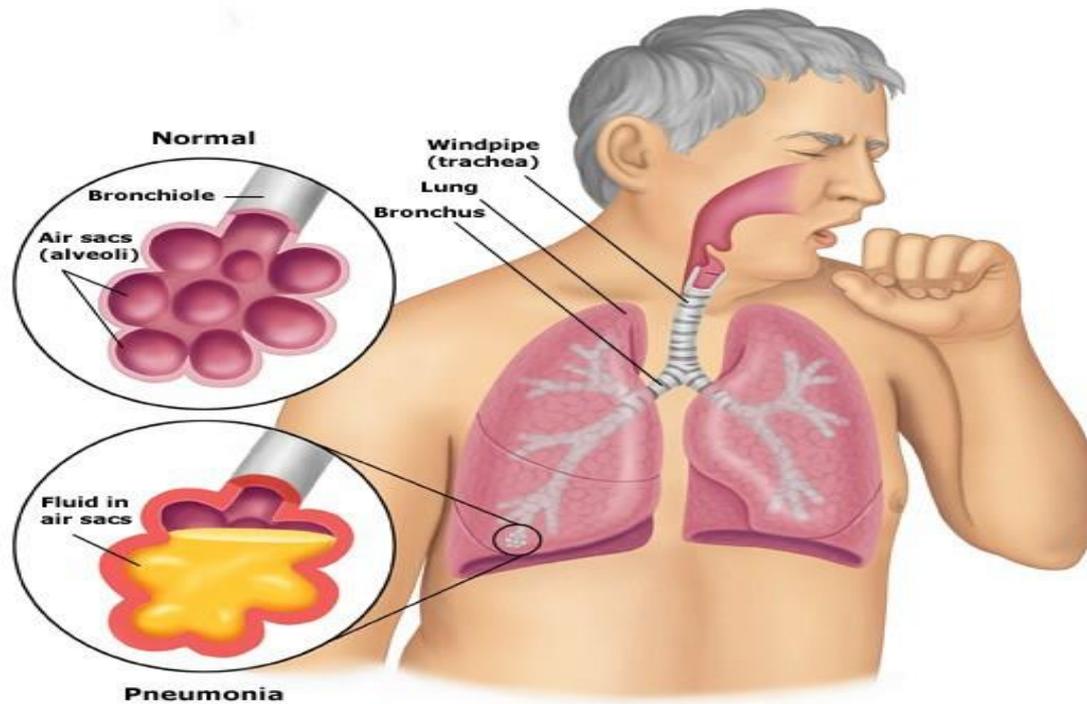
National Patient Safety Goal

**Reduce the risk of influenza
and pneumococcal disease
in institutionalized older
patients**



Age 65 or older? Get your pneumonia shot!





National Patient Safety Goal

**Reduce the risk
of
surgical fires**





Alcohol-based Skin Preps, Surgical Drapes, Patient







National Patient Safety Goal

**Encourage patients'
active involvement in
their own care as patient
safety strategy**



**Speak Up
for Safety!**

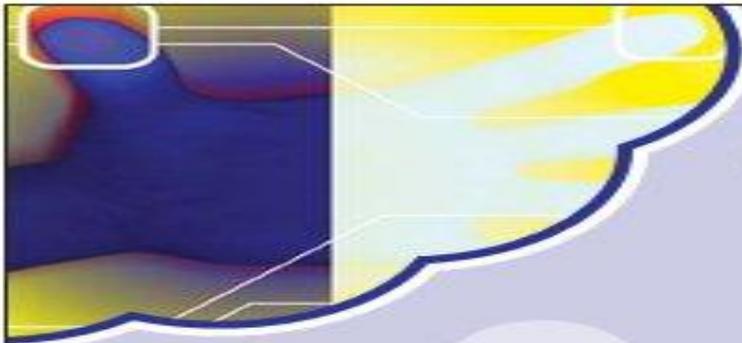
SPEAK UP!
Ask Questions
Voice Concerns



The Joint Commission

SpeakUP™

Patient Education Videos



**I'm concerned about
healthcare acquired
infections.**

**Please wash your hands
before touching me.**

Ask:

I'm not sure
I understand
what you said

Could you
please
explain that

I'm worried that...

Can I come back
with my family to
talk

National Patient Safety Goal

**Prevent health care-
associated pressure ulcers
(decubitus ulcers)**

قرحة الفراش

Applies to: Nursing Care Center



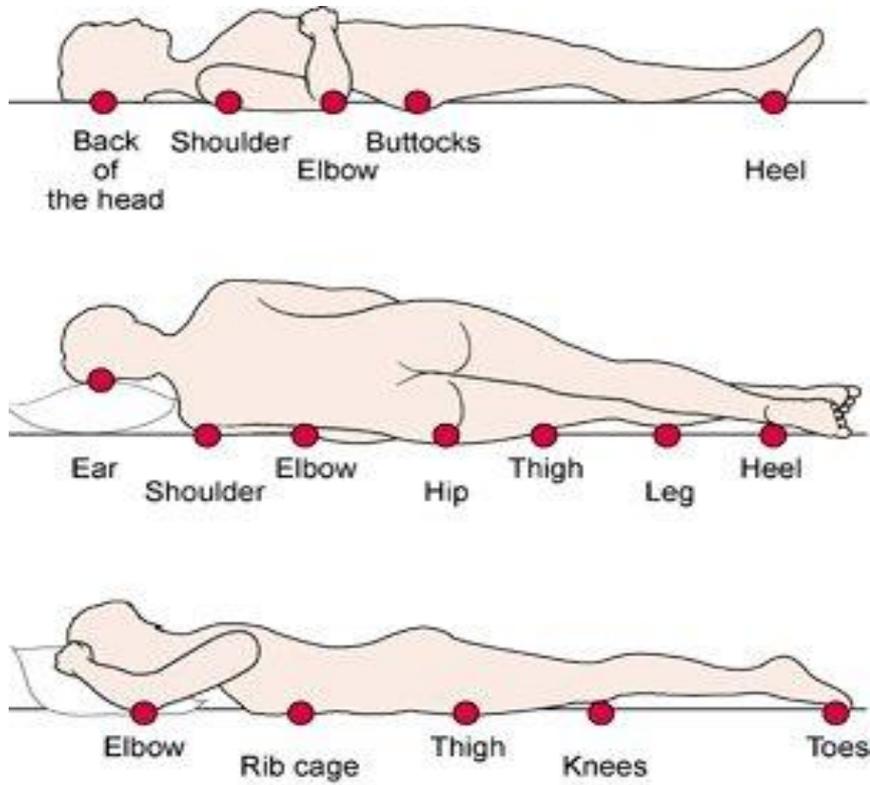


Diagram showing the areas of the body at risk of pressure sores when lying down

© CancerHelp UK
Original diagram by the Tissue Viability Society

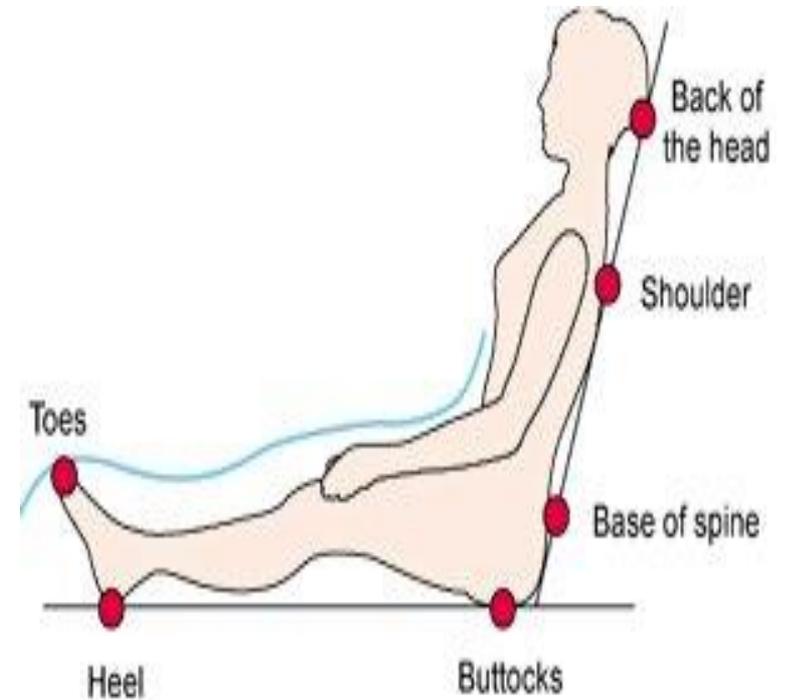


Diagram showing areas of the body at risk of pressure sores when sitting

© CancerHelp UK

Original diagram by the Tissue Viability Society





Pressure Ulcer Day on every 3rd Thursday in November



National Patient Safety Goal

**Identify patients at
risk for suicide**

Applies to: Behavioral Health Care, Hospital

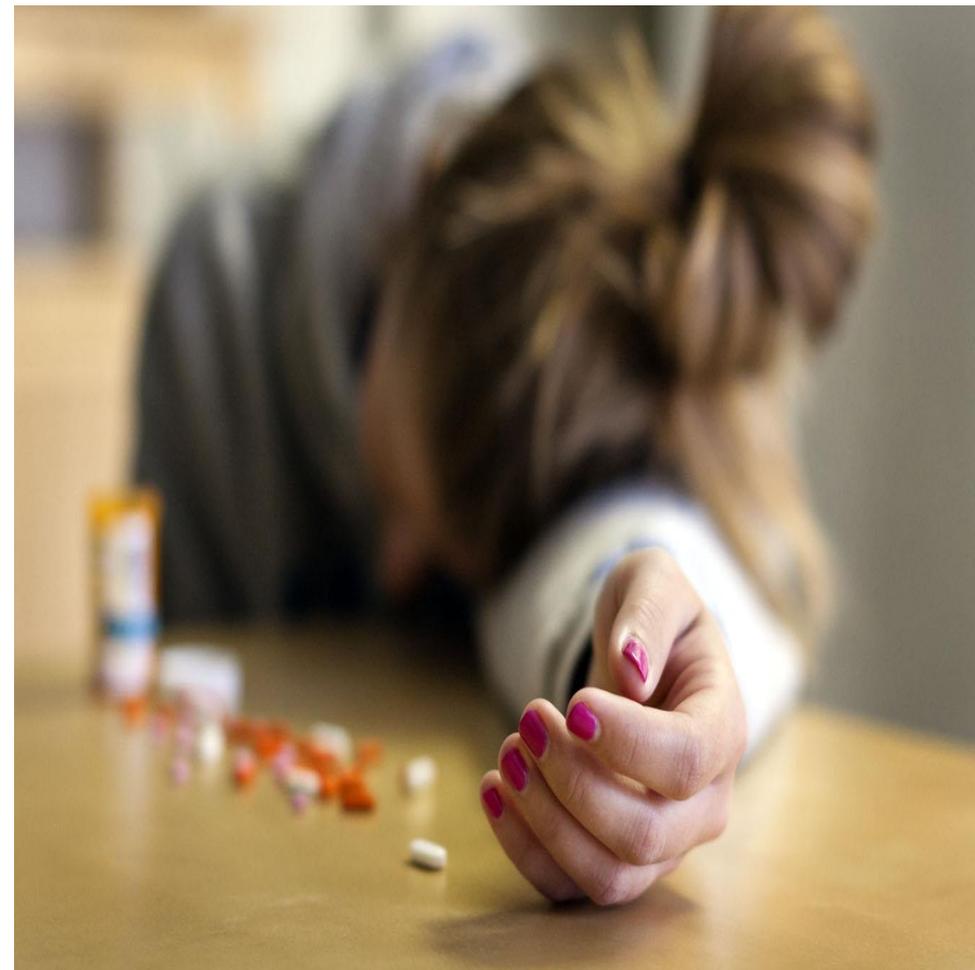
(Applicable to psychiatric hospitals and patients being treated for emotional or behavioral disorders in general hospitals)



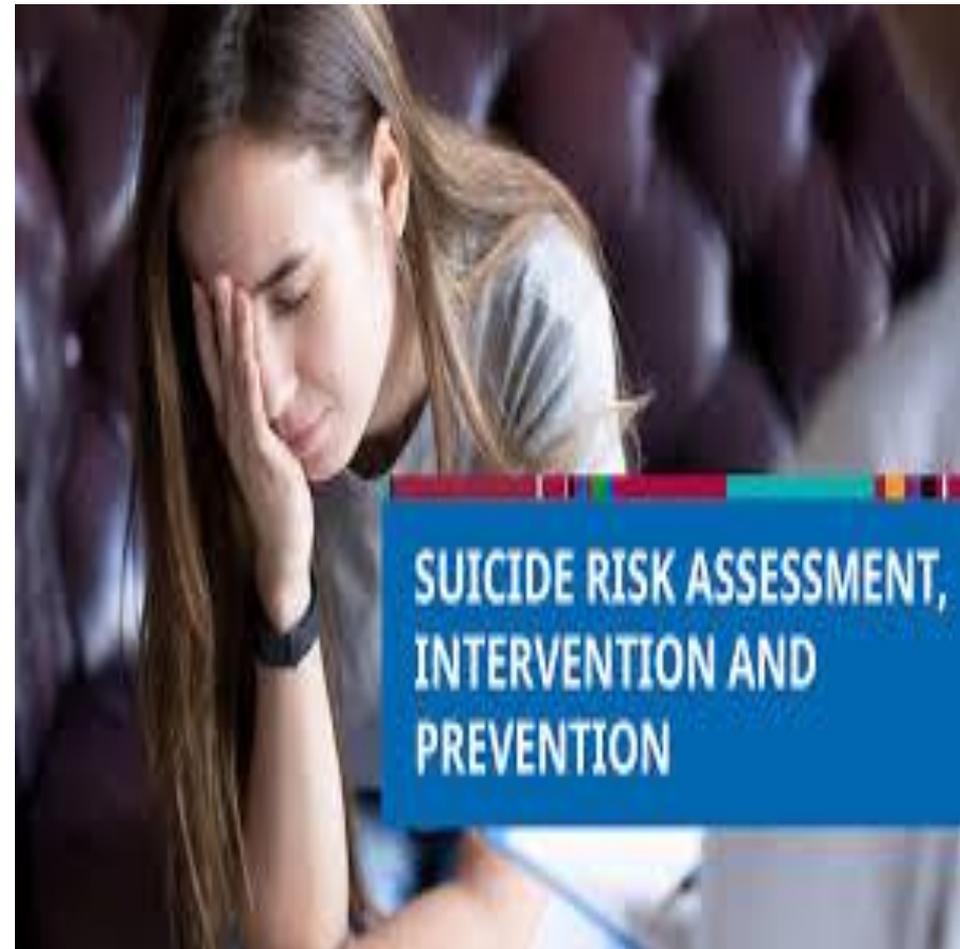
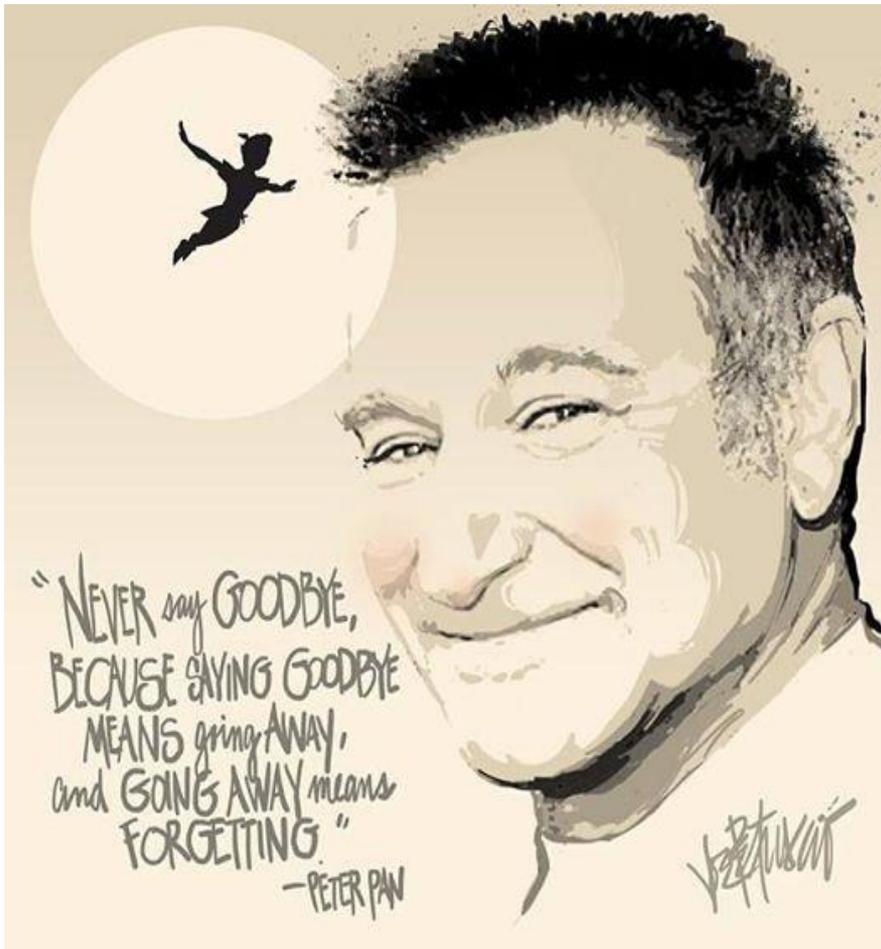
Suicide Risk Assessment



Suicide Risk Assessment



Suicide Risk Assessment



Thank You

