Goal 1
Improve the accuracy of patient identification.
NPSG 01.01.01: Use at least two patient identifiers when providing care, treatment, and services.
NPSG 01.03.01: Eliminate transfusion errors related to patient misidentification.

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.

Goal 3
Improve the safety of using medications.
NPSG 03.04.01: Label all medications, medication containers, and other solutions on and off the sterile field in perioperative and other procedural settings. NOTE: Medication containers include syringes, medicine cups and basins.
NPSG 03.05.01: Reduce the likelihood of patient harm associated with the use of anticoagulation therapy.
NPSG 03.06.01: Maintain and communicate accurate patient medication information.

Goal 6
Reduce the harm associated with clinical alarm systems.
NPSG 06.01.01: Improve the safety of clinical alarm systems.

Goal 7
Reduce the risk of health care-associated infections.
NPSG 07.01.01: Comply with the current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines.
NPSG 07.03.01: Implement evidence-based practices to prevent health care-associated infections due to multidrug-resistant organisms in acute care hospitals.
NPSG 07.04.01: Implement evidence-based practices to prevent central line-associated bloodstream infections.
NOTE: This requirement covers short- and long-term central venous catheters and peripherally inserted central catheter (PICC) lines.
NPSG 07.05.01: Implement evidence-based practices for preventing surgical site infections.
NPSG 07.06.01: Implement evidence-based practices to prevent indwelling catheter-associated urinary tract infections (CAUTI).

Goal 15
The hospital identifies safety risks inherent in its patient population.
NPSG 15.01.01: Identify patients at risk for suicide. NOTE: This requirement applies only to psychiatric hospitals and patients being treated for emotional or behavioral disorders in general hospitals.

Universal Protocol for Preventing Wrong Site, Wrong Procedure and Wrong Person Surgery.
UP 01.01.01: Conduct a preprocedure verification process.
UP 01.02.01: Mark the procedure site.
UP 01.03.01: A time-out is performed before the procedure.

For more information on the National Patient Safety Goals, visit www.jointcommission.org.
HAP (Hospital Accreditation Program)