

2024 National Patient Safety Goals

Barnes-Jewish Hospital works to ensure that established processes remain effective and are consistently implemented to address the following National Patient Safety Goals, set forth annually by The Joint Commission.

Improve the Accuracy of Patient Identification

- Use two patient identifiers when providing care, treatment and services.
- Label specimen containers in the presence of the patient.
- Use a distinct naming system to identify newborn patients.
- Eliminate transfusion errors related to patient identification.

Improve Communication Among Caregivers

- Report critical results of diagnostic tests and procedures within established time limits to the provider/staff authorized to respond to the results. Monitor and improve meeting time limits.

Improve Safety of Using Medications

- Label medications and solutions, one at a time, when transferring from original packaging into another container (for example, a syringe or basin) even when only one medication/solution is being used.
- Follow established procedures to reduce potential harm to patients on blood thinners.
- Compare patient home medications to those ordered in the hospital to identify discrepancies or duplicates; maintain and communicate accurate patient medication information throughout hospital stay; give patient a new medication list at discharge.

Improve Safety of Clinical Alarms

- Establish alarm safety as a priority and identify the most important alarm signals to manage.
- Ensure alarm management procedures address key aspects such as alarm settings, changing or turning off alarms, response to alarms and checking equipment for proper operation of alarms.



Reduce Health Care-Associated Infections

- Follow hand-hygiene guidelines and set goals to improve hand-cleaning rates.
- Use proven guidelines to prevent health care-associated infections related to the use of certain devices and surgical procedures.

Improve Health Care Equity as a Quality & Safety Priority

- A designated leader is named to improve health care equity for hospital patients.
- Assess patient health-related social needs; provide community resources and support services.
- Use quality & safety data stratified by sociodemographic characteristics (such as age, race/ethnicity, preferred language) to identify hospital patient groups with disparities.
- Develop goals and implement an action plan to improve and sustain select disparities.

Reduce the Risk for Suicide

- For designated behavioral health patient space, conduct an environmental risk assessment to identify and eliminate features that could be used to attempt suicide.
- For non-designated spaces where patients at risk for suicide may be treated, implement procedures to mitigate or remove environmental risks that may pose a risk for self-harm.
- Screen patients for suicide risk who are being evaluated or treated for behavioral health conditions as their primary reason for care. If screening is positive, conduct a focused suicide assessment; implement protective measures to keep patient safe.
- Trained and competent staff care for, monitor and reassess patients at risk for suicide. At discharge, provide follow up care and counseling, as appropriate.
- Monitor and improve effectiveness of processes for managing suicide risk.

Universal Protocol for Preventing Wrong Site, Wrong Procedure and Wrong Person Surgery

Applicable to all surgical and nonsurgical invasive procedures:

- Use a pre-procedure checklist to verify correct medical record documents, test results, and/or required equipment/supplies are available and match to the correct patient.
- Mark the procedure site which should be visible after skin preparation and draping.
- Just prior to the start of the procedure, conduct a “time out” as a final check that the correct patient, procedure and site are identified.

