

Facts about the National Patient Safety Goals

In 2002, The Joint Commission established its National Patient Safety Goals (NPSGs) program; the first set of NPSGs was effective January 1, 2003. The NPSGs were established to help accredited organizations address specific areas of concern in regard to patient safety.

Development of the Goals

A panel of widely recognized patient safety experts advise The Joint Commission on the development and updating of NPSGs. This panel, called the Patient Safety Advisory Group, is composed of nurses, physicians, pharmacists, risk managers, clinical engineers and other professionals who have hands-on experience in addressing patient safety issues in a wide variety of health care settings. The Patient Safety Advisory Group works with Joint Commission staff to identify emerging patient safety issues, and advises The Joint Commission on how to address those issues in NPSGs, *Sentinel Event Alerts*, standards and survey processes, performance measures, educational materials, and Center for Transforming Healthcare projects. Following a solicitation of input from practitioners, provider organizations, purchasers, consumer groups, and other stakeholders, The Joint Commission determines the highest priority patient safety issues and how best to address them. The Joint Commission also determines whether a NPSG is applicable to a specific accreditation program and, if so, tailors the goal to be program-specific.

New NPSG on clinical alarm safety: phased implementation in 2014 and 2016

In June 2013, The Joint Commission approved a new NPSG on clinical alarm safety ([NPSG.06.01.01](#)) for hospitals and critical access hospitals. The new goal will be implemented in two phases: phase one begins January 1, 2014, when hospitals will be required to establish alarm safety as an organizational priority and identify the most important alarms to manage based on their own internal situations; phase two begins January 1, 2016, when hospitals will be expected to develop and implement specific components of policies and procedures, and to educate staff in the organization about alarm system management.

It is important to note that the proposed phase two requirements may be enhanced before they are implemented in 2016. These changes could arise from hospitals' experience with phase one requirements as well as newly emerging evidence about best practices. If any changes to the phase two requirements are made, accredited hospitals will be notified through field review and *Perspectives*.

Both the Advancement of Medical Instrumentation (AAMI) and [ECRI Institute](#) websites contain useful information on safely managing alarm systems. In addition, The Joint Commission published a *Sentinel Event Alert* on clinical alarm management in April. The *Alert* contains suggestions for assessing and managing risks associated with alarms, and complements the expectations of the new NPSG. Additional Joint Commission resources on the topic include two [Take 5 podcasts](#) and the [replay of a webinar](#) held in May.

For more information

The National Patient Safety Goals for each program and more information are available on The Joint Commission [website](#). Questions can be sent to the Standards Interpretation Group at (630) 792-5900 or via the [Standards Online Question Submission Form](#).