

# JCAHO Patient Safety Goals and Their Application to Healthcare Settings

JCAHO Patient Safety Goals	Settings									
	AMC	AL	BHC	CAH	DSC	HC	HOSP	LAB	LTC	OBS
<b>Goal 1 — Improve the accuracy of patient identification.</b>	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Requirement 1a ( <b>expanded</b> ): Use at least two patient identifiers (neither to be the patient's room number) whenever administering medications or blood products; taking specimens for clinical testing; or providing any other treatments or procedures.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Requirement 1b ( <b>expanded</b> ): Prior to the start of any invasive procedure, conduct a final verification process to confirm the correct patient, procedure, and site. Use active—not passive—communication techniques.	*	✓		*	✓	✓	*	✓	✓	✓
<b>Goal 2 — Improve the effectiveness of communication among caregivers.</b>	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Requirement 2a: For verbal or telephone orders or for telephonic reporting of critical test results, verify the complete order or test result by having the person receiving the order or test result "read-back" the complete order or test result.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Requirement 2b: Standardize a list of abbreviations, acronyms and symbols that are not to be used throughout the organization.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Requirement 2c ( <b>new</b> ): Measure, assess, and, if appropriate, take action to improve the timeliness of reporting of critical test results and values.	✓		✓	✓	✓	✓	✓	✓		✓
Requirement 2d ( <b>new</b> ): All values defined as critical by the lab are to be reported directly to a responsible licensed caregiver within the time frames established by the lab (in cooperation with nursing and medical staff).								✓		
<b>Goal 3 — Improve the safety of using medications.</b>	✓		✓	✓	✓	✓	✓		✓	✓
Requirement 3a: Remove concentrated electrolytes (including, but not limited to, potassium chloride, potassium phosphate, and sodium chloride >0.9%) from patient care units.	✓			✓	✓	✓	✓		✓	✓
Requirement 3b: Standardize and limit the number of drug concentrations available in the organization.	✓		✓	✓	✓	✓	✓		✓	✓
Requirement 3c ( <b>new</b> ): Identify, and at a minimum, annually review a list of look alike/sound alike drugs used in the organization and take action to prevent errors involving interchange of these drugs.	✓		✓	✓		✓	✓		✓	✓
<b>Goal 4 — Eliminating wrong-site, wrong-patient, and wrong procedure surgery</b>	*			*	✓		*		*	*
Requirement 4a: Create and use a preoperative verification process, such as a checklist, to confirm that appropriate documents are available.	*			*	✓		*		*	*
Requirement 4b: Implement a process to mark the surgical site and involve the patient in the marking process.	*			*	✓		*		*	*
<b>Goal 5 — Improve the safety of using infusion pumps.</b>	✓	✓	✓	✓	✓	✓	✓		✓	✓
Requirement 5a: Ensure free-flow protection on all general use and patient-controlled analgesia intravenous infusion pumps used in the organization.	✓	✓	✓	✓	✓	✓	✓		✓	✓
<b>Goal 6 — Improve the effectiveness of clinical alarm systems.</b>	*	*	*	*	✓	*	*	*	*	*
Requirement 6a: Implement regular preventive maintenance and testing of alarm systems.	*	*	*	*	✓	*	*	*	*	*
Requirement 6b: Assure that alarms are activated with appropriate settings and are sufficiently audible.	*	*	*	*	✓	*	*	*	*	*
<b>Goal 7 — Reduce the risk of healthcare-acquired infections</b>	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Requirement 7a: Comply with current CDC hand hygiene guidelines.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Requirement 7b: Manage as sentinel events all identified cases of unanticipated death or major permanent loss of function associated with a healthcare-acquired infection.	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
<b>Goal 8 (new) — Accurately and completely reconcile medications across continuum of care</b>	✓	✓	✓	✓	✓	✓	✓		✓	✓
Requirement 8a: Develop a process for obtaining and documenting a complete list of the patient's current medications upon admission to the organization (full implementation by January 2006).	✓	✓	✓	✓	✓	✓	✓		✓	✓
Requirement 8b: A complete list of the patient's medications is communicated to the next provider of service when it refers or transfers a patient to another setting, service, practitioner or level of care within or outside the organization.	✓	✓	✓	✓	✓	✓	✓		✓	✓
<b>Goal 9 (new) — Reduce risk of patient harm resulting from falls</b>		✓		✓		✓	✓		✓	
Requirement 9a: Assess/reassess each patient's risk for falling, including the potential risk associated with the patient's medication regimen, and take action to address any identified risks.		✓		✓		✓	✓		✓	
Requirement 9b: Implement a fall reduction program, including a transfer protocol, and evaluate the effectiveness of the program.									✓	
<b>Goal 10 (new) — Reduce risk of influenza and pneumococcal disease in older adults</b>		✓			✓				✓	
Requirements: Develop and implement a protocol for: administration and documentation of the flu vaccine (10a) and pneumococcus vaccine (10b); and for identifying new cases of influenza and management of outbreaks (10c).		✓			✓				✓	
<b>Goal 11 (new) — Reduce the risk of surgical fires</b>	✓									✓
Requirement 11: Educate staff, including operating licensed independent practitioners and anesthesia providers, on how to control heat sources, manage fuels, and establish guidelines to minimize oxygen concentration under drapes.	✓									✓
	AMC	AL	BHC	CAH	DSC	HC	HOSP	LAB	LTC	OBS



**Settings:**

AMC = Ambulatory Care  
 AL = Assisted Living  
 BHC = Behavioral Health Care  
 CAH = Critical Access Hospitals  
 DSC = Disease Specific Care

HC = Home Care  
 HOSP = Hospitals  
 LAB = Laboratories  
 LTC = Long Term Care  
 OBS = Office-Based Surgery



\* No longer surveyed under the National Patient Safety Goals; is now a JCAHO Environment of Care standard or other JCAHO requirement.