

## PATIENT SAFETY GOALS



## A CROSS-SECTIONAL COMPLIANCE ASSESSMENT INTERNATIONAL PATIENT SAFETY (IPSG) GOALS



*“A Cross-Sectional Compliance Assessment Study on the implementation of international Patient Safety Goals (IPSGs) in different wards of Santokba Durlabhji Memorial Hospital, Jaipur, Rajasthan.”*

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## INTRODUCTION & BACKGROUND

In the current healthcare system, ensuring patient safety stands as a paramount priority in all hospitals (Govt & Private). With the evolution of medical practices and technologies in the coming days, there emerges a pressing need for standardized treatment guidelines, standard operational guidelines, and standard clinical protocols aimed at safeguarding patient life from preventable harm in hospital and ensuring guided patient safety to all patients.

- The IPSGs by WHO provide a foundational framework to promote patient safety, standardize services, and improve quality globally.
- A compliance assessment study of the IPSGs was conducted at Santokba Durlabhji Memorial Hospital in Jaipur, focusing on various wards.
- The study aims to identify gaps in compliance, explore factors influencing adherence, and propose targeted interventions to improve patient safety.
- These interventions are designed to enhance patient safety outcomes and ensure consistent, high-quality care across the hospital.

## Problem statement:

These interventions are designed to enhance patient safety outcomes and ensure consistent, high-quality care across the hospital. Lack of comprehensive IPSG data at Santokba Durlabhji Memorial Hospital, Jaipur, hinders uniform patient safety standards but offers an opportunity to identify improvement areas.

## Research Question:

What is the level of compliance of the International patient safety goal (IPSG) implementation in Santokba Durlabhji Memorial Hospital, Jaipur, Rajasthan?

## Objective of Study:

- To assess the compliance of International patient safety goal (IPSG) - 1 , 2, 3 & 5 in different wards of Santokba Durlabhji Memorial Hospital, Jaipur, Rajasthan
- To identify the gaps in the implementation of International patient safety goals (IPSG) - 1, 2, 3 & 5 in different wards of Santokba Durlabhji Memorial Hospital, Jaipur, Rajasthan

# RESEARCH METHODOLOGY:

## Type of Study:

Exploratory Type - Cross-Sectional Study

## Study Area:

Different wards / ICU of Santokba Durlabhji Memorial Hospital, Jaipur, Rajasthan.

## Sampling Technique:

Convenience Sampling Technique utilized because patient should be in condition to respond to questioner

• **Sampling Method:** Non - Probability Sampling Method

## Sample Target Population:

| Ward Name                                | Wards Beds | Total Patients<br>in two month | Total<br>Staff |
|------------------------------------------|------------|--------------------------------|----------------|
| Neurosurgery Ward                        | 14 beds    | 420                            | 35             |
| General Medical Intensive Care Unit Ward | 15 beds    | 413                            | 38             |
| Cardiac Ward                             | 17 beds    | 467                            | 40             |
| Pediatric Intensive Care Unit Ward       | 10 beds    | 190                            | 37             |
| Neurosurgery Intensive Care Unit Ward    | 14 beds    | 410                            | 50             |
| Total                                    | 70 beds    | 1900                           | 200            |

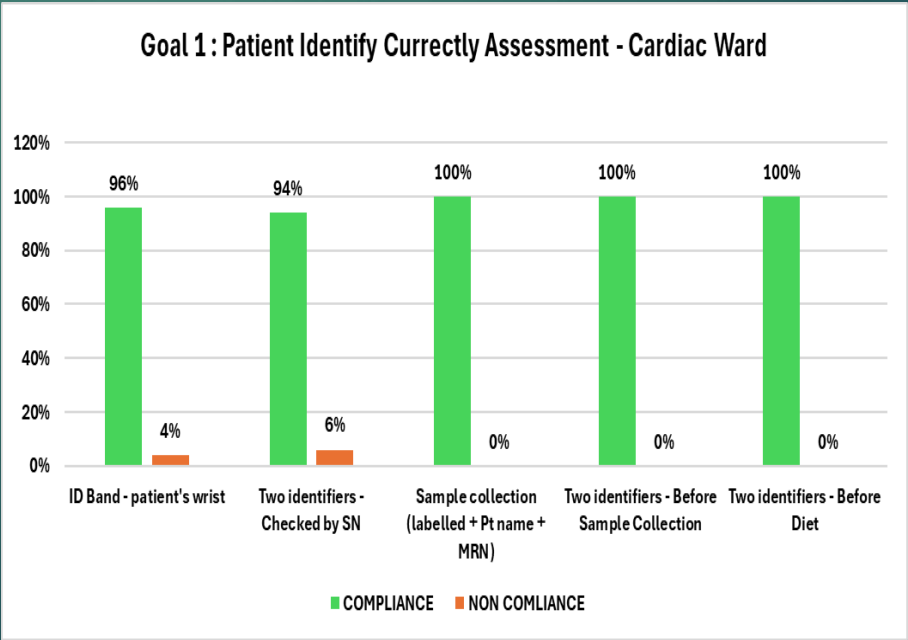
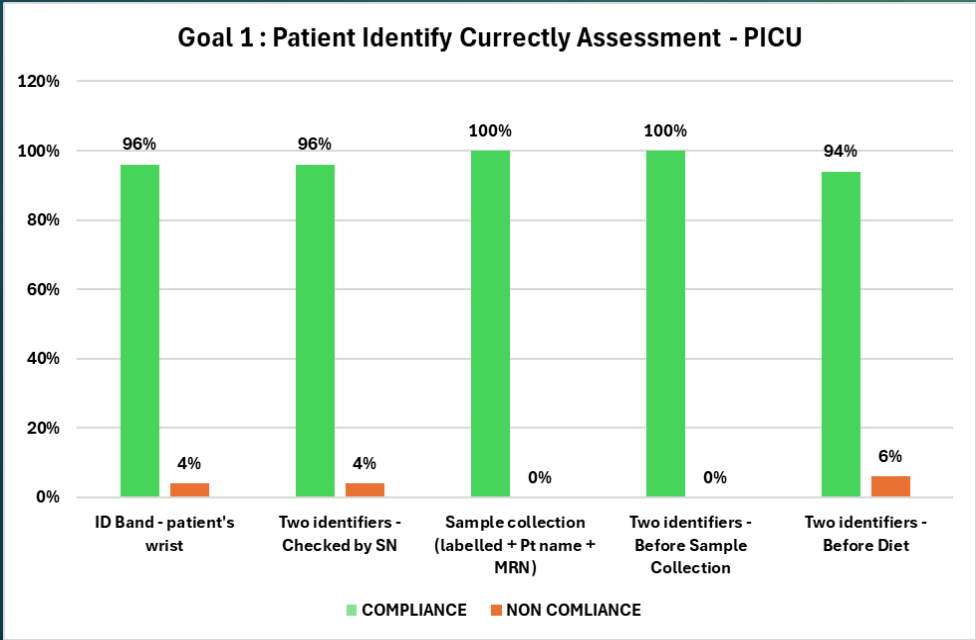
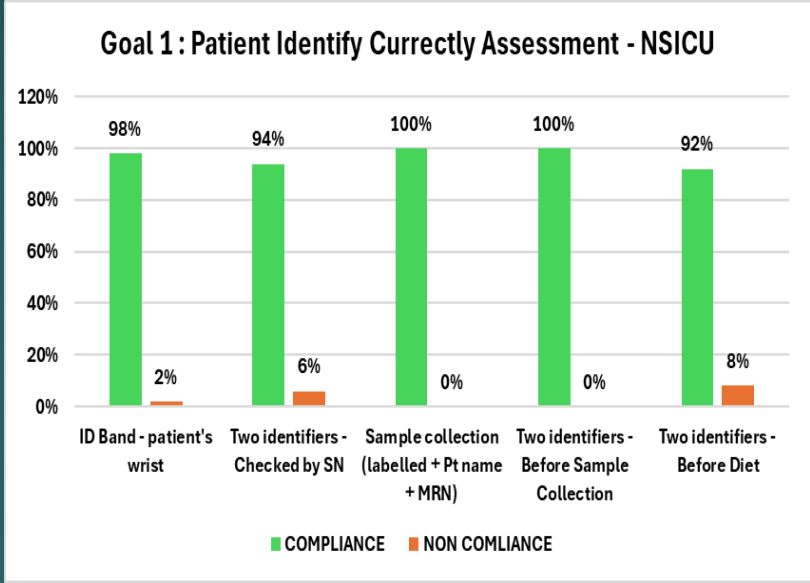
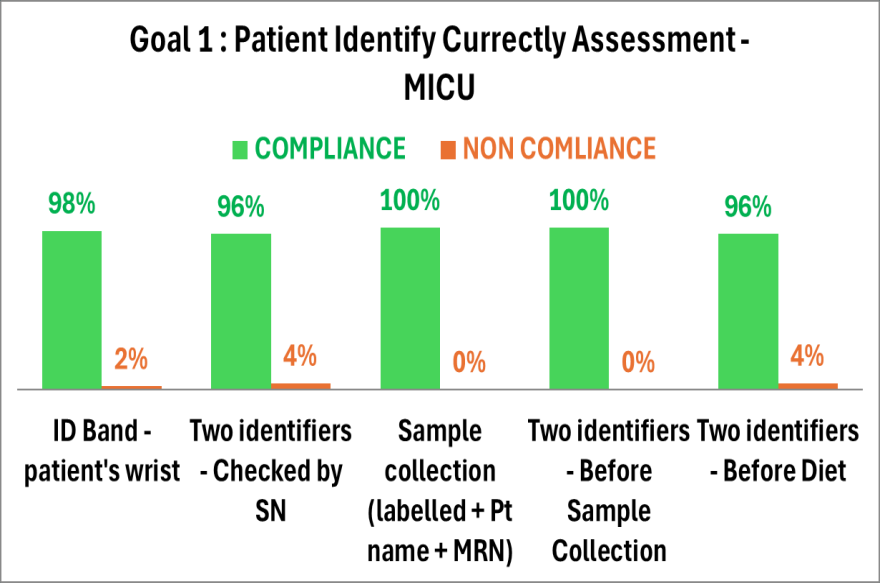
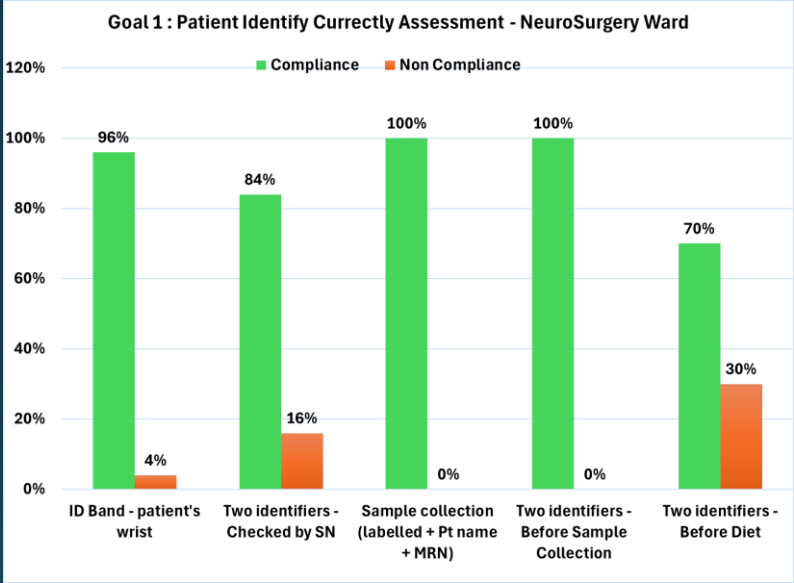
## Tool & Technique:

Method; Structured Questionnaire

Material: checklist

Technique: Face-to-face personal interview & observation

# IPSG GOAL : 1 : COMPLIANCE ASSESSMENT – 5 WARDS

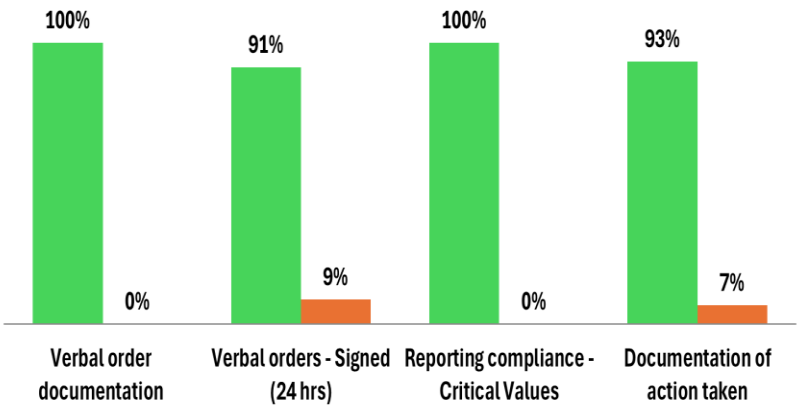


PATIENT  
IDENTIFY  
CORRECTLY

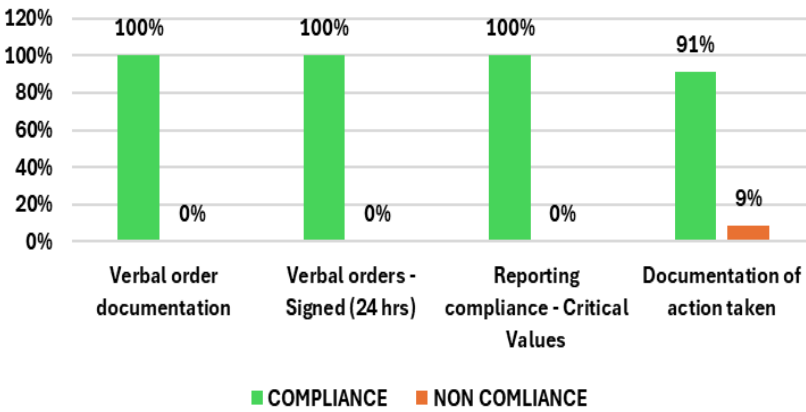
# IPSG GOAL : 2 : COMPLIANCE ASSESSMENT – 5 WARDS

Goal 2: Effective Communication Assessment -  
NeuroSurgery Ward

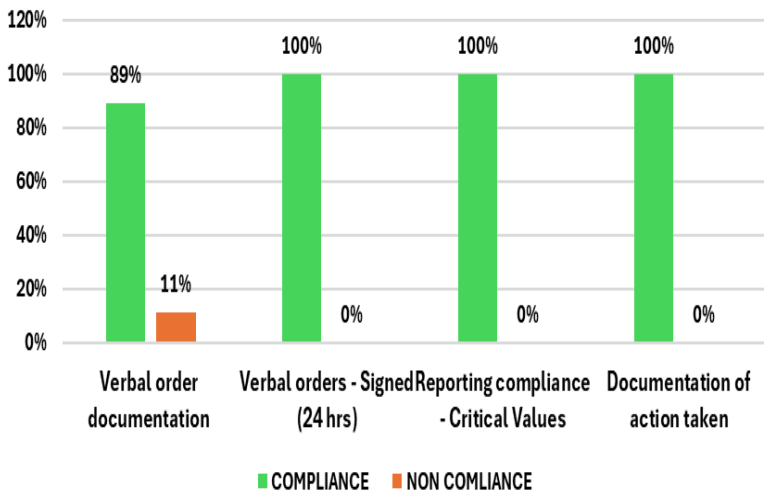
■ Compliance ■ Non Compliance



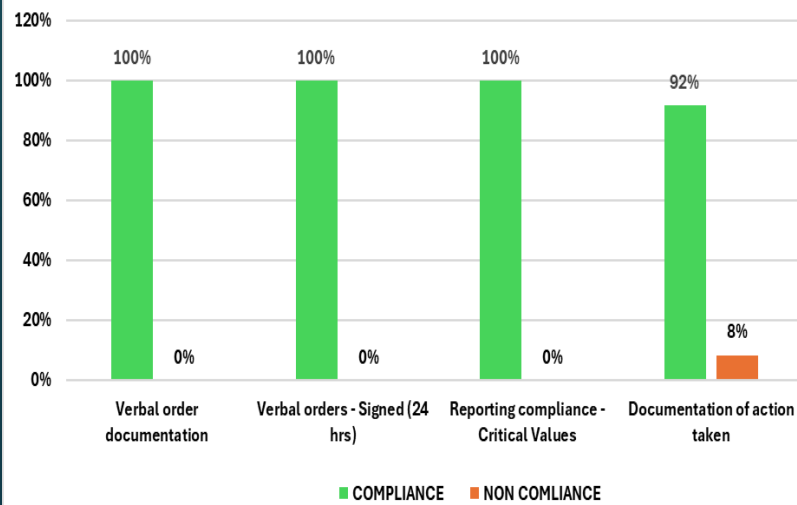
Goal 2: Effective Communication Assessment -  
MICU



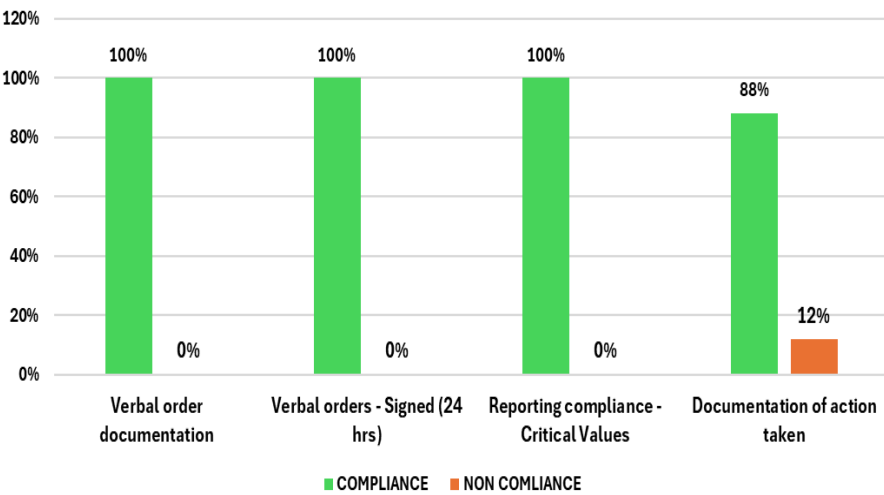
Goal 2: Effective Communication Assessment - NSICU



Goal 2: Effective Communication Assessment - PICU

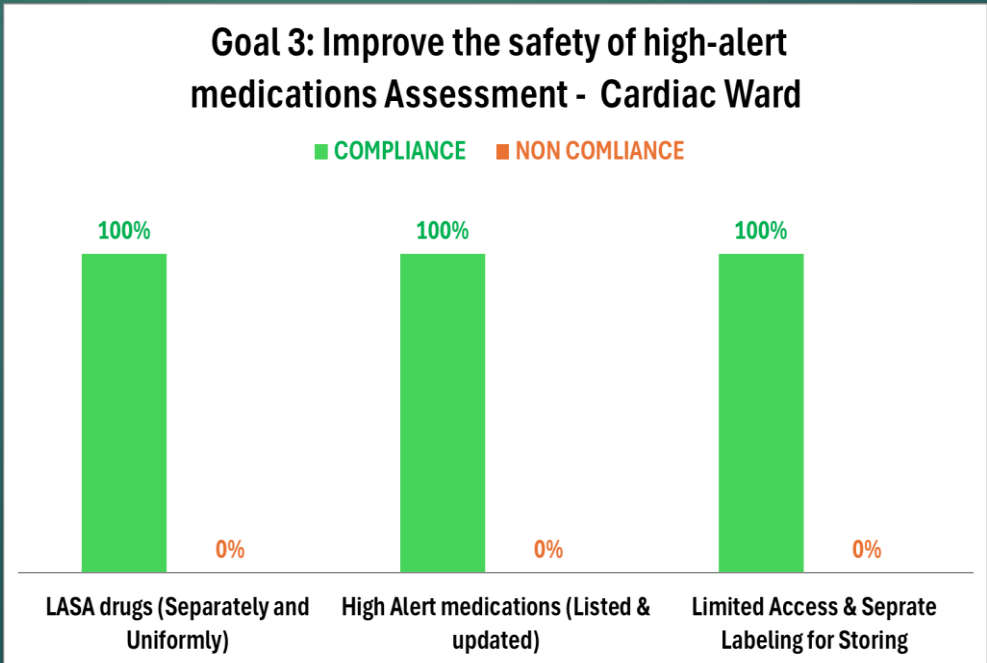
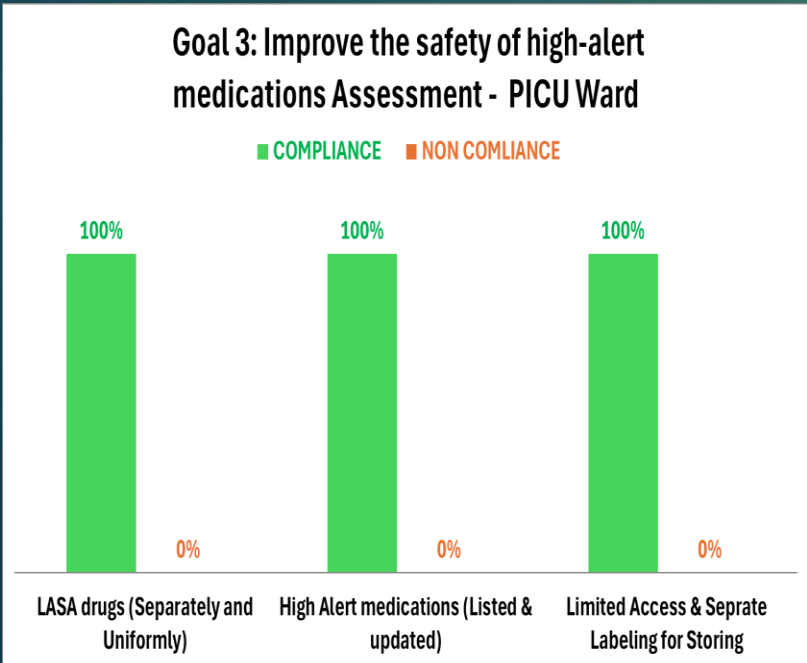
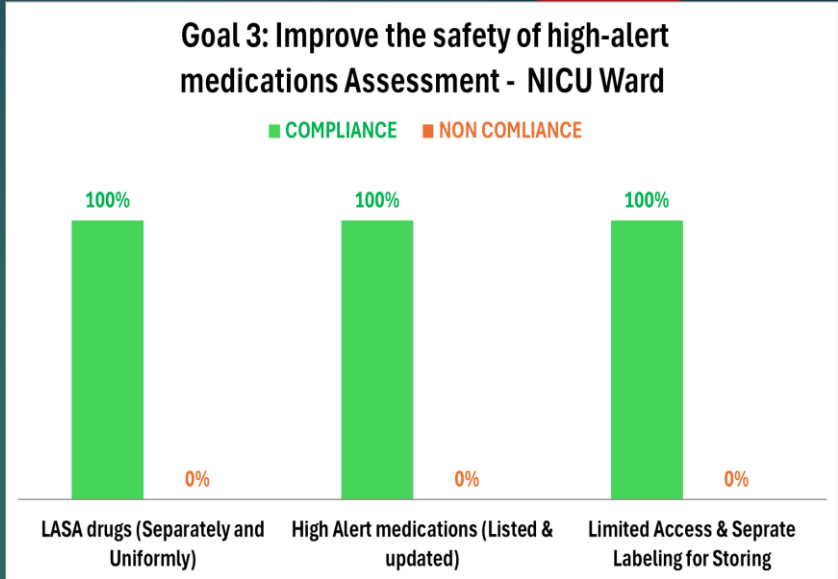
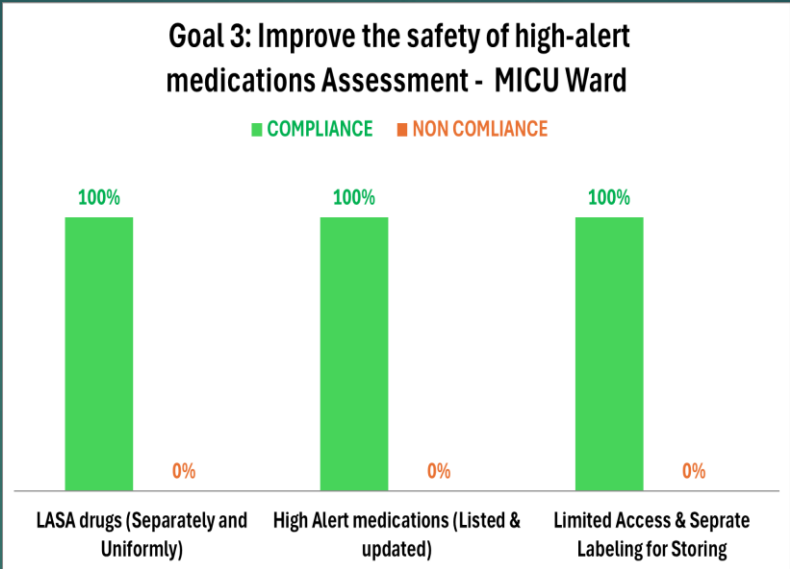
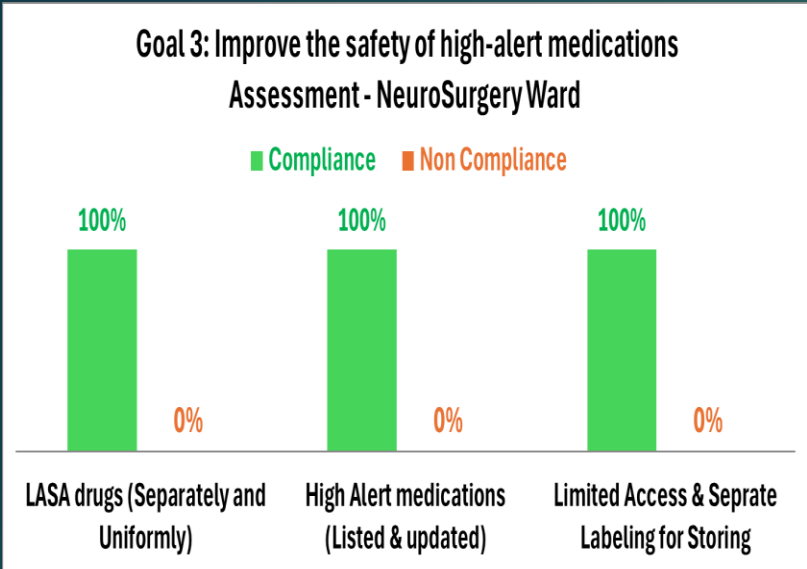


Goal 2: Effective Communication Assessment - Cardiac Ward



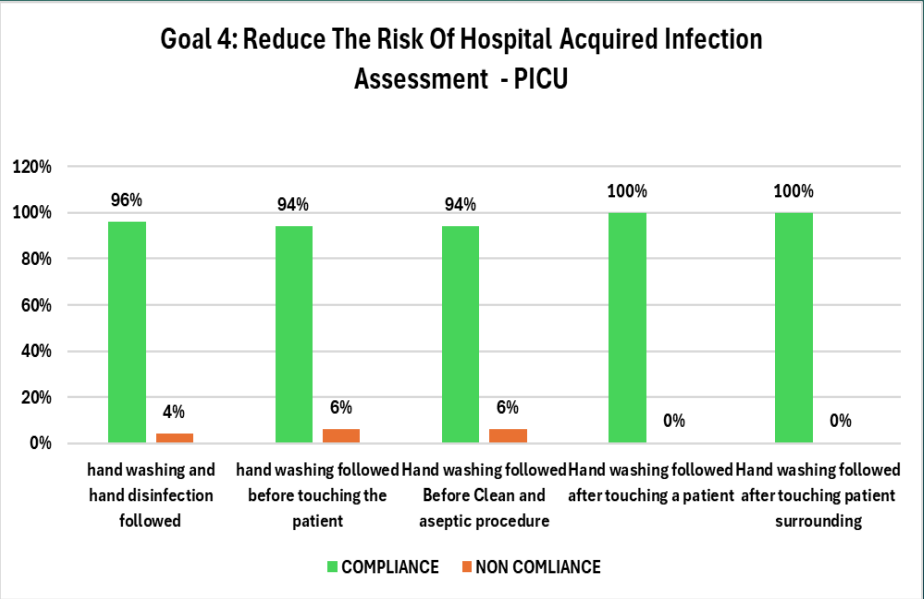
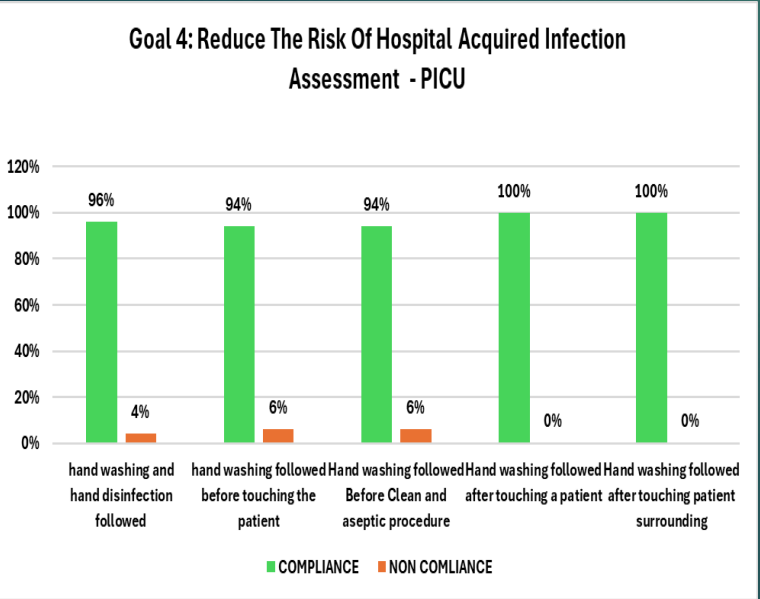
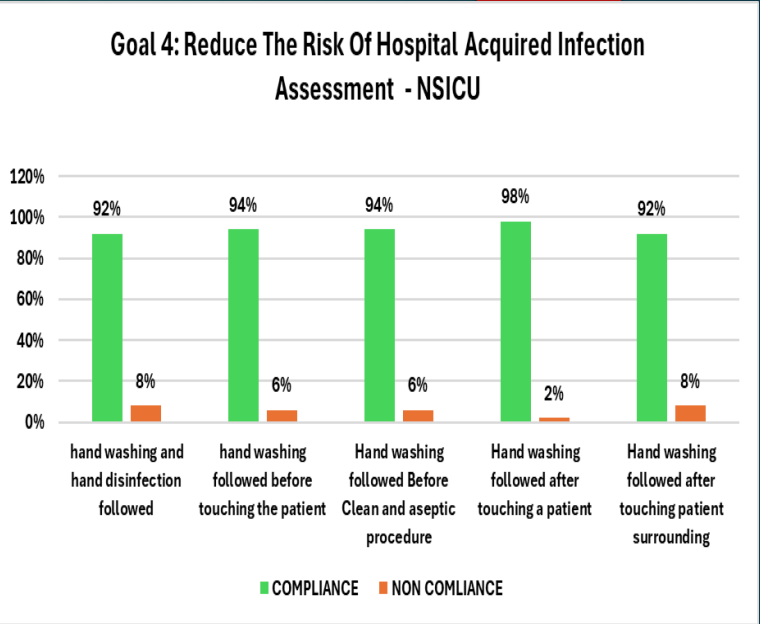
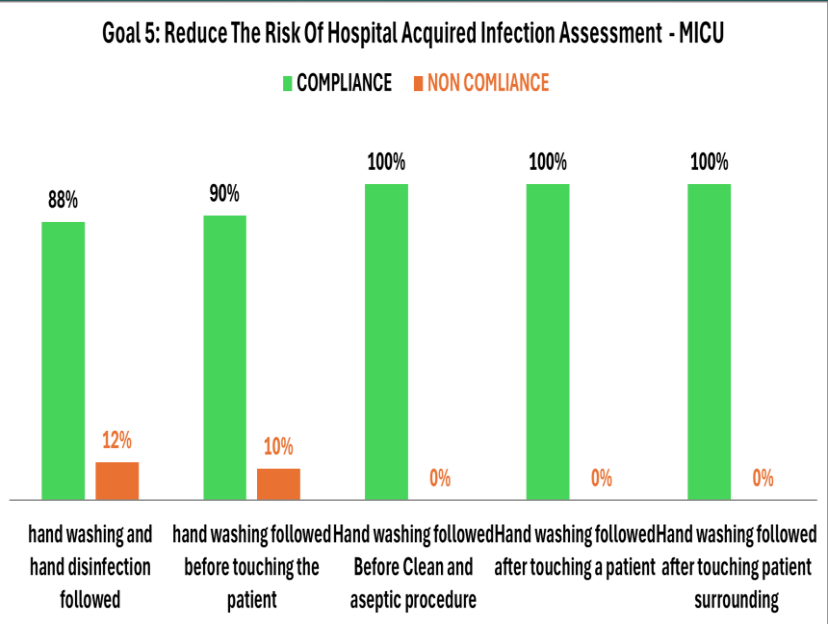
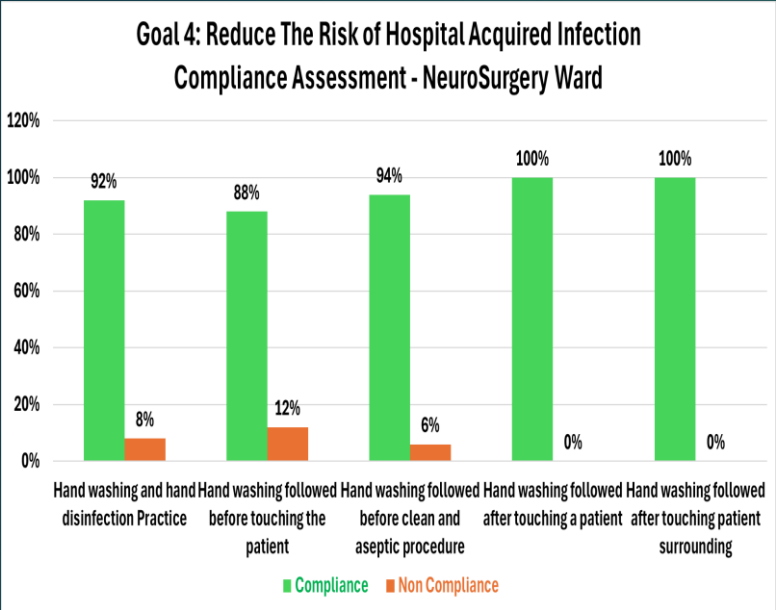
EFFECTIVE  
COMMUNICATION

# IPSG GOAL : 3 : COMPLIANCE ASSESSMENT – 5 WARDS



SAFETY OF  
HIGH-ALERT  
MEDICATIONS

# IPSG GOAL : 5 : COMPLIANCE ASSESSMENT – 5 WARDS



**RISK OF  
HOSPITAL  
ACQUIRED  
INFECTION**

# SDMH HOSPITAL SCORE BASED ON TOTAL SCORE OF WARDS

IPSG Goal 1: Patient Identify Correctly

| Element                                     | HOSPITAL SCORING: GOAL 1: BASED ON TOTAL OF WARDS |          |               |          |
|---------------------------------------------|---------------------------------------------------|----------|---------------|----------|
|                                             | TOTAL SCORE                                       |          | % TOTAL SCORE |          |
|                                             | Comp                                              | Non Comp | Comp          | Non Comp |
| ID Band - patient's wrist                   | 242                                               | 8        | 97%           | 3%       |
| Two identifiers - Checked by SN             | 232                                               | 18       | 93%           | 7%       |
| Sample collection (labeled + Pt name + MRN) | 83                                                | 0        | 100%          | 0%       |
| Two identifiers - Before Sample Collection  | 83                                                | 0        | 100%          | 0%       |
| Two identifiers - Before Diet               | 226                                               | 24       | 90%           | 10%      |

IPSG Goal 2: Effective Communication

| Element                                | HOSPITAL SCORING: GOAL 1: BASED ON TOTAL OF WARDS |          |               |          |
|----------------------------------------|---------------------------------------------------|----------|---------------|----------|
|                                        | TOTAL SCORE                                       |          | % TOTAL SCORE |          |
|                                        | Comp                                              | Non Comp | Comp          | Non Comp |
| Verbal order documentation             | 112                                               | 2        | 98%           | 2%       |
| Verbal orders - Signed (24 hrs)        | 112                                               | 2        | 98%           | 2%       |
| Reporting compliance - Critical Values | 80                                                | 0        | 100%          | 0%       |
| Documentation of action taken of CV    | 76                                                | 4        | 95%           | 5%       |

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

| Element                                       | HOSPITAL SCORING: GOAL 1: BASED ON TOTAL OF WARDS |          |               |          |
|-----------------------------------------------|---------------------------------------------------|----------|---------------|----------|
|                                               | TOTAL SCORE                                       |          | % TOTAL SCORE |          |
|                                               | Comp                                              | Non Comp | Comp          | Non Comp |
| LASA drugs (Separately and Uniformly)         | 5                                                 | 0        | 100%          | 0%       |
| High Alert medications (Listed & updated)     | 5                                                 | 0        | 100%          | 0%       |
| Limited Access & Seprate Labeling for Storing | 5                                                 | 0        | 100%          | 0%       |

IPSG Goal 5: Reduce The Risk Of Hospital Acquired Infection

| Element                                                  | HOSPITAL SCORING: GOAL 1: BASED ON TOTAL OF WARDS |          |               |          |
|----------------------------------------------------------|---------------------------------------------------|----------|---------------|----------|
|                                                          | TOTAL SCORE                                       |          | % TOTAL SCORE |          |
|                                                          | Comp                                              | Non Comp | Comp          | Non Comp |
| Hand washing and hand disinfection Practice              | 232                                               | 18       | 93%           | 7%       |
| Hand washing followed before touching the patient        | 226                                               | 24       | 90%           | 10%      |
| Hand washing followed before clean and aseptic procedure | 238                                               | 12       | 95%           | 5%       |
| Hand washing followed after touching a patient           | 245                                               | 5        | 98%           | 2%       |
| Hand washing followed after touching patient surrounding | 246                                               | 4        | 98%           | 2%       |

# RESULTS:

Based on Exploratory – Cross-sectional study for 2 months at 5 wards of SDMH Hospital, Jaipur. I have conducted the compliance assessment under International patient Safety Goal (IPSG) for IPSG 1,2,3,& 5 goals. Following are the key results for the same;

**IPSG Goal – Patient Identify Correctly :1 :** Based on average of total compliance under IPSG 1 Goal, Hospital has achieved 96% compliance and 4% noncompliance.

**IPSG Goal – Effective Communication :2 :** Based on average of total compliance under IPSG 2 Goal, Hospital has achieved 98% compliance and 2% noncompliance.

**IPSG Goal – Improve the safety of high-alert medications :3 :** Based on average of total compliance under IPSG 3 Goal, Hospital has achieved 100% compliance and 3% noncompliance.

**IPSG Goal – Reduce The Risk Of Hospital Acquired Infection:5 :** Based on average of total compliance under IPSG 5 Goal, Hospital has achieved 95% compliance and 5% noncompliance.

This performance reflects the hospital's strong adherence to patient safety protocols, minimizing the risk of errors associated with patient identification, High alert medications are kept safely and keeping check on the hospital acquired infection or secundar infections to patients. However, specific areas such as using two identifiers, verbal order documentation and handwashing still have some opportunity for improvement and achieving the “Zero gap” in the patient safety.

## Conclusion:

The hospital has continuously adhered to safety measures as per international patient safety standards, with true compliance charges in vital regions. The whole compliance inside the protection of excessive-alert pills is mainly good. This result demonstrates the clinic's determination to decreasing the risk of mistakes by ensuring the mistake proofing system implementation and enhancing the admitted patient protection.

However, other regions, consisting of the usage of two identities before food plan (90% compliance) and some other areas, provide possibilities for further improvement. Overall, all IPSG 1,2,3,& 5 goals has coverage of 95% and above so hospital with maintaining these standards for the patient safety as per international standards. Focusing on these regions will allow the health facility to preserve and improve its high degrees of patient safety care and protection for admitted patients.

# Factors affecting of IPSG

**Inadequate Identification Processes:** Lack of standardized identification procedures (e.g., using only verbal confirmation instead of wristbands or barcodes).

**Communication Gap:** Poor communication during medication process, result in misidentification.

**Training Gap:** staff was aware but need reorientation and regular follow up by department team leader, need for improvement of training method (on job training) to all staff(nursing staff, ward boy, dietary staff)

**Shortage of staff:**  
High patient occupancy & insufficient staffing.

# RECOMMENDATION

- Regular training and update sessions on IPSGs for every department employee for their regular upgradation about quality parameters.
- Regular – Quarterly basis internal assessment can be practiced by all department.
- Staff should be sensitized about the possible risk involved due to noncompliance of strap belt on wheelchairs.
- Regular audits of documentation should be done, and the respected team should be trained accordingly.
- Staff should be sensitized about the hospital acquired infection and importance of five movements of hand hygiene.
- Every Department should develop IPSG action plan with timeline and responsibility for all identified gaps in IPSG implementation.
- Quarterly review of all departments using IPSG action plan by Quality department.

## ETHICAL & GENDER CONSIDERATION:

1. Clearance from the Hospital Team
2. Ethical consideration: Relevance, rationale & technical considerations
3. Gender & Culture Sensitiveness approved.
4. Informed Consent & Confidentiality, Privacy of responses & data.
5. Only for research purposes.

## LIMITATIONS OF THE STUDY:

1. Cross-Sectional Study
2. Limited Time Duration
3. Limited Resources (Financial & Human Resources)

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THANKS