

Safeguarding Patients Through Standards: An Audit of Patient

Identification, High-Alert Medication Safety, and Infection Prevention

1. Introduction

Patient safety has emerged as a critical global health priority, and the International Patient Safety Goals (IPSG) formulated by the Joint Commission International (JCI) provide a structured approach to enhance patient care standards. Hospitals worldwide are adopting these goals to minimize risks, reduce errors, and improve patient outcomes. CK Birla Hospital, Jaipur, a renowned multispecialty facility, has committed itself to upholding these goals in routine care. This study focuses on IPSG Goal 1 (Identify patients correctly), Goal 3 (Improve the safety of high-alert medications), and Goal 5 (Reduce the risk of healthcare-associated infections). The importance of this study lies in assessing how effectively these goals are being implemented and complied with in daily practice. The results will help identify areas of strength and opportunities for improvement, ultimately contributing to safer care delivery and supporting the hospital's quality improvement initiatives.

2. Research Question

What is the level of implementation and compliance with IPSG Goals 1, 3, and 5 at CK Birla Hospital, Jaipur, and what are the key gaps and improvement opportunities?

3. Objectives

Primary Objective:

- To assess the implementation and compliance level of IPSG Goals 1, 3, and 5 in CK Birla Hospital, Jaipur.

Secondary Objectives:

- To identify departments with the highest and lowest compliance rates.
- To evaluate factors contributing to non-compliance.
- To suggest actionable recommendations for enhancing compliance with IPSG goals.

4. Hypothesis

Null Hypothesis (H_0):

There is no association between hospital departments and the level of adherence to IPSG Goals 1, 3, and 5.

Alternative Hypothesis (H₁):

There is an association between hospital departments and the level of adherence to IPSP Goals 1, 3, and 5.

5. Material and Methods

- **Study Design:** Descriptive cross-sectional study.
- **Setting:** CK Birla Hospital, Jaipur – a multispecialty tertiary care hospital.
- **Study Population:** The **primary study population** consisted of **300 inpatients** admitted to various departments during the study period. These patients were the subjects of observational audits to assess adherence to IPSP standards, particularly those relating to identification, medication handling, and infection prevention. Additionally, **available nursing staff** on duty in the respective departments were approached for informal interviews. These interviews provided context and clarification regarding observed practices and staff awareness of IPSP protocols.
- **Inclusion Criteria:**
 - Inpatients present during the observation period.
 - Nursing staff available and involved in direct patient care during data collection.
- **Exclusion Criteria:**
 - Outpatients and discharged patients.
 - Staff from administrative, diagnostic, or non-clinical areas not directly involved in the processes under review.
- **Study Tools:** Standardized IPSP audit checklist; observation sheet, interviews with staff.
- **Duration of Study:** March to May 2025 (3 months).
- **Sample Size:** 300 patients observed across departments.
- **Sampling Technique:** Convenience sampling including all available shifts and departments over the study period.
- **Data Collection Procedure:** Direct observation using the checklist; review of patient records and medication charts; staff interviews for clarification; data entry into Excel for analysis.
- **Operational Definitions:**
 - **International Patient Safety Goals (IPSP):** Specific objectives established by international healthcare organizations, such as the World Health Organization (WHO), to address key areas of patient safety concern, including patient identification, communication, and medication safety.
 - **Compliance rate:** % of correctly performed steps as per IPSP checklist
 - **Patient identification compliance:** Use of two identifiers before procedures

- **High-alert medication compliance:** Double-checking and labeling adherence
- **HAI prevention compliance:** Hand hygiene, PPE use, catheter care standards

6. Data Analysis Plan

Data will be analyzed using Microsoft Excel. Descriptive statistics (mean, percentage, frequency) will be calculated. Comparative analysis will be performed to identify differences across departments.

7. Ethical Considerations

- Verbal consent will be obtained from all participating staff.
- Data confidentiality will be strictly maintained.
- No patient identifiers will be collected.

8. Implications of Research

The findings will provide hospital leadership with a clear picture of IPSP implementation status. This will help prioritize training, strengthen safety protocols, and enhance compliance monitoring. Ultimately, it will support the hospital's commitment to continuous quality improvement and achieving accreditation standards, benefiting both patients and healthcare workers.

9. References

1. World Health Organization. Patient safety: making health care safer [Internet]. Geneva: World Health Organization; 2017 [cited 2025 May 10]. Available from: <https://www.who.int/patientsafety>
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4. Pronovost PJ, Needham D, Berenholtz S, Sinopoli D, Chu H, Cosgrove S, et al. Improving patient safety in intensive care units. *Crit Care Med*. 2006 Nov;34(11 Suppl):S165-73.
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