

# Proposed 2014 National Patient Safety Goal on Alarm Management

## Critical Access Hospital (CAH) and Hospital (HAP) Accreditation Programs

### NPSG.06.01.01

1 CAH Improve the safety of clinical alarm systems.

**Rationale:**

2 Alarms are intended to alert caregivers of potential patient problems, but if they are not properly  
3 managed, they can compromise patient safety. This is a multi-faceted problem. In some situations,  
4 individual alarms are difficult to detect. At the same time, many patient care areas have numerous  
5 alarms and the resulting noise tends to desensitize staff and cause them to ignore alarms or even  
6 disable them. Other issues associated with effective alarm management include too many devices  
7 with alarms, default settings that are not at an actionable level, and alarm limits that are too narrow.  
8 These issues vary greatly among critical access hospitals and even within different units in a single  
9 critical access hospital.

10  
11 There is general agreement that this is an important safety issue. Universal solutions have yet to be  
12 identified, but it is important for a critical access hospital to understand its own situation and to  
13 develop a systematic, coordinated approach to alarms. This NPSG focuses on managing alarms  
14 that have the most direct relationship to patient safety. As alarm management solutions are  
15 identified, this NPSG will be updated to reflect best practices. \*

16 \* Footnote: Additional information on alarm safety can be found on the AAMI website  
17 <http://www.aami.org/htsi/alarms/index.html>. ECRI has identified alarm hazards as one of the top  
18 technology hazards for 2013; more information can be found at [www.ecri.org/2013hazards](http://www.ecri.org/2013hazards).

19 HAP Improve the safety of clinical alarm systems.

**Rationale:**

20 Alarms are intended to alert caregivers of potential patient problems, but if they are not properly  
21 managed, they can compromise patient safety. This is a multi-faceted problem. In some situations,  
22 individual alarms are difficult to detect. At the same time, many patient care areas have numerous  
23 alarms and the resulting noise tends to desensitize staff and cause them to ignore alarms or even  
24 disable them. Other issues associated with effective alarm management include too many devices  
25 with alarms, default settings that are not at an actionable level, and alarm limits that are too narrow.  
26 These issues vary greatly among hospitals and even within different units in a single hospital.

27  
28 There is general agreement that this is an important safety issue. Universal solutions have yet to be  
29 identified, but it is important for a hospital to understand its own situation and to develop a  
30 systematic, coordinated approach to alarms. This NPSG focuses on managing alarms that have the  
31 most direct relationship to patient safety. As alarm management solutions are identified, this NPSG  
32 will be updated to reflect best practices. \*

33 \* Footnote: Additional information on alarm safety can be found on the AAMI website  
34 <http://www.aami.org/htsi/alarms/index.html>. ECRI has identified alarm hazards as one of the top  
35 technology hazards for 2013; more information can be found at [www.ecri.org/2013hazards](http://www.ecri.org/2013hazards).

# Proposed NPSG on Alarm Management

---

## Elements of Performance (EPs) for NPSG.06.01.01

---

### EP Text for NPSG.06.01.01, EP 1

---

- 36 CAH 1. Leaders establish alarm safety as a critical access hospital priority.
- 37 HAP 1. Leaders establish alarm safety as a hospital priority.

---

### EP Text for NPSG.06.01.01, EP 2

---

- 38 CAH 2. Prepare an annual inventory of alarms used in the critical access hospital and identify the  
39 default alarm settings. (For more information, refer to Standard EC.02.04.01)
- 40 HAP 2. Prepare an annual inventory of alarms used in the hospital and identify the default alarm  
41 settings. (For more information, refer to Standard EC.02.04.01)

---

### EP Text for NPSG.06.01.01, EP 3

---

- 42 CAH 3. Based on the annual inventory, identify the most important alarms to manage.
- 43 HAP 3. Based on the annual inventory, identify the most important alarms to manage.

---

### EP Text for NPSG.06.01.01, EP 4

---

- 44 CAH 4. Establish policies and procedures for managing the alarms identified in EP 3 above that  
45 at a minimum address the following:  
46 - Whether specific alarms are needed or unnecessarily contribute to safety concerns  
47 - When alarms can be disabled  
48 - When alarm parameters can be changed  
49 - Who in the organization has the authority to make decisions about disabling alarms and  
50 changing alarm parameters  
51 - Monitoring and responding to alarms  
52 - Checking individual alarms for accurate settings, proper operation, and detectability  
53 (For more information, refer to Standard EC.02.04.03)
- 54 HAP 4. Establish policies and procedures for managing the alarms identified in EP 3 above that  
55 at a minimum address the following:  
56 - Whether specific alarms are needed or unnecessarily contribute to safety concerns  
57 - When alarms can be disabled  
58 - When alarm parameters can be changed  
59 - Who in the organization has the authority to make decisions about disabling alarms and  
60 changing alarm parameters  
61 - Monitoring and responding to alarms  
62 - Checking individual alarms for accurate settings, proper operation, and detectability  
63 (For more information, refer to Standard EC.02.04.03)

---

### EP Text for NPSG.06.01.01, EP 5

---

- 64 CAH 5. Educate staff about alarm policies and procedures.
- 65 HAP 5. Educate staff about alarm policies and procedures.