

- QM.18.5.2 The time-out is initiated by a designated member of the team and involves the members of the team, including the individual performing the procedure, the anesthesia providers, and the nurse(s) involved.
- QM.18.5.3 The entire procedure team uses active communication during the time out.
- QM.18.5.4 During the time-out, the team members agree on the correct patient identity, the correct procedure to be performed, the correct site, and when applicable, the availability of the correct implant or equipment.
- QM.18.6 The hospital documents its processes for preventing wrong patient, wrong site, and wrong surgery/procedure.

QM.19 The hospital ensures availability and safety of infusion pumps.

- QM.19.1 Infusion pumps are available with adequate numbers throughout patient care areas.
- QM.19.2 Infusion pumps have "free-flow" protection.
- QM.19.3 Infusion pumps have documented preventative maintenance, inspection and testing on a regular basis.

QM.20 The hospital ensures the safety of the alarm systems of patient care equipment.

- QM.20.1 All alarm systems for patient care equipment (such as infusion pumps and monitors) have documented preventative maintenance, inspection and testing on a regular basis.
- QM.20.2 All staff are trained on the safe use of alarm systems for patient care equipment and the use of appropriate settings for sound.

QM.21 The hospital ensures appropriate communication of patient care information during patient handovers.

- QM.21.1 Patient care information is appropriately documented in a clearly understandable form to all care providers within and between care settings.
- QM.21.2 The hospital implements a standardized approach to handover communication between staff (e.g., Situation, Background, Assessment, Recommendation-SBAR), change of shift, and between different patient care units in the course of a patient transfer.

QM.22 The hospital has a process for effective identification, assessment, and intervention for patients who are at risk for pressure ulcers.

- QM.22.1 All patients are assessed for pressure ulcers on admission using a standard risk assessment tool.
- QM.22.2 All patients are re-assessed for pressure ulcers every twenty four hours.
- QM.22.3 The hospital implements evidence-based interventions that prevent pressure ulcers.

QM.23 The hospital has a process for effective identification, assessment, and intervention for patients who are at risk for falling.

- QM.23.1 Patients are assessed for the risk of fall on admission.