From the desk of Ana Pujols McKee, M.D., Executive Vice President and CMO

Every day there is more news about Ebola and the cases cared for in the United States. The Centers for Disease Control and Prevention projects that without a major intervention, Ebola cases will climb from the current number of approximately 8,000 cases to 500,000 by January 2015.

The Joint Commission strongly urges physician leaders to focus their attention on their organization's infection prevention practices. A comprehensive assessment of these practices should be conducted followed by a plan for improvement that includes education, simulation, and ongoing performance monitoring. Physician leaders need to serve in a central role in this process since it has been well established that physician compliance in many of these practices tends to track below the performance of other health care professionals.

The Joint Commission surveys one-third of the 4,000 hospitals accredited each year. According to current hospital survey findings, over 1,000 findings of noncompliance with the infection control standards will be generated by the end of 2014. These include failures in hand hygiene and proper use of personal protective equipment, breaches in high level disinfection and sterilization, and inadequate sterilizer maintenance. It is abundantly clear that much work needs to be done and the focused attention of the physician leaders is essential.

The CDC website remains a primary source of Ebola information.

Headlines

Special Edition of Quick Safety: "Preparing for Ebola response in U.S. health care facilities." According to a recently released special edition of Quick Safety, now is the time to assess the readiness of your organizational response to Ebola Virus Disease. The newsletter provides a signs and symptoms checklist, lists infection prevention and control precautions, and urges organizations to review their infection control mechanisms and emergency operations plan. In addition, links to resources from the Centers for Disease Control and Prevention are provided.

Tell us your thoughts on ...
Revised diagnostic imaging standards: Comment through October 24.

Proposed requirements for the Acute Stroke Ready Hospital Certification program: Comment until October 29.
"Flash" sterilization replaced with Immediate Use Steam Sterilization: In August, the CMS replaced the term "flash" sterilization with "Immediate Use Steam Sterilization" (IUSS) in surgical settings. The term "flash" sterilization is outmoded.

Resources


Free webinar replay on the misuse of vials.

CDC hospital checklist for Ebola preparedness: Practical suggestions to help hospitals detect possible Ebola cases, protect employees, and respond appropriately.

New AHA monograph: Five Core Strategies for Developing High-Impact Physician Leadership

Quick Safety Issue 6, Reviewing maternal morbidity: Severe maternal morbidity in the United States continues to occur and, in fact, has increased since the late 1990s. From 2009 to mid-2014, The Joint Commission has received 65 reports of maternal death. Although maternal deaths have been the traditional indicator of maternal health outcomes, these tragic events have been likened to the "tip of the iceberg."

Blogs, Podcasts & Webinars

Doing No Harm by Paul M. Schyve, M.D., senior advisor.

Vial Safety with Lisa Waldowski, M.S., APRN, CIC [Podcast 5:52]

News

Hospitals' hand washing strategies effective in reducing patient infection rates | Cleveland.com

How a culture of professionalism affects patient care | PreCheck

Understanding healthcare's top technology hazard | Forbes

Wrongly connected tubing a major concern, says Joint Commission | Outpatient Surgery

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