To transfuse or not to transfuse - that is the question
It's often not clearly defined if and when a patient should be transfused. Both the overutilization and underutilization of blood transfusion can cause complications - for the patient, the physician and the hospital. The Joint Commission's Patient Blood Management (PBM) Certification program paves the way for a clear determination. The PBM Certification program:

- Provides evidence-based criteria, tools and resources for blood transfusion
- Reduces adverse events for patients who ultimately don't require transfusion
- Helps maintain adequate blood supply for emergent needs
- Optimizes care for patients who truly need transfusion
- Facilitates a team-based, collaborative, and coordinated approach to transfusion that supports the physician
- Spreads evidence-based practices throughout the organization
- Improves patient safety and quality of care

The joint PBM certification program is based on AABB's PBM standards, used therein with permission. Learn more.

THREE THINGS YOU SHOULD KNOW

1. Top five most challenging requirements for 2015
See the table for the top five Joint Commission requirements identified most frequently as "not compliant" during surveys and reviews conducted in 2015. The data represents citations only from organizations due to be surveyed during this time period - that is, data from for-cause surveys are not included. For more information, see the April issue of Perspectives, or view the table.

2. Prepublication standards released for NPSG on CAUTIs
A new National Patient Safety Goal focuses on catheter-associated urinary tract infections for accredited nursing care centers, and the existing CAUTI NPSG for accredited hospitals was revised. The standards are effective Jan. 1, 2017. The changes for hospitals and CAHs were made to bring the goal into alignment with the updated Compendium of Strategies to Prevent Healthcare-Associated Infections in Acute Care Hospitals: 2014. View the prepublication standards.
3. Clarification: Note regarding Advanced-Level CT certification for technologists

In February, The Joint Commission posted prepublication requirements applicable to all accredited organizations providing diagnostic imaging. The standards, which become effective Sept. 1, 2016, include a note (Note No. 1 of HR.01.02.05, Element of Performance 19) that communicates an expectation that, effective Jan. 1, 2018, all CT technologists have advanced-level CT certification. The intent of this note is to give customers a “heads up” about the future direction of the imaging standards. Before introducing the 2018 requirement, Joint Commission staff will research how best to structure a new expectation for advanced CT certification, and any proposed standards will be posted for public comment before they are finalized. See the prepublication standards.

RESOURCES

In the Journal: "Using the Targeted Solutions Tool® to Improve Emergency Department Handoffs in a Community Hospital," by Mignon F. Benjamin, MD, et al.


TRENDING ON JOINTCOMMISSION.ORG

Emergency Management portal: New resource made available after Brussels attack
In the wake of the terrorist attacks in Brussels in late March, the U.S. Department of Homeland Security and Health and Human Services released a joint resource for health care providers to support situational awareness and readiness for such events. For details, visit The Joint Commission's Emergency Management portal.

FEATURED PHYSICIAN

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Dr. Aaronson is formerly a chief resident in the Harvard Affiliated Emergency Medicine Residency program at Brigham and Women's and Massachusetts General Hospital. During her residency, Dr. Aaronson was one of the team of doctors who treated patients from the Boston Marathon bombing in 2013. She wrote about her experience in a Wall Street Journal article: On the front-lines of battlefield triage in Boston. Find out more about Dr. Aaronson.

EYE ON AHA PHYSICIAN LEADERSHIP FORUM

News from the American Hospital Association's Physician Leadership Forum e-newsletter.

MACRA News: When is an APM not an APM? While it is clear that Congress intended to nudge physicians toward participation in alternative payment models (APMs) when it enacted the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), it is less clear which particular models Congress had in mind. Much will depend on how the Centers for Medicare & Medicaid Services (CMS) interprets the law in upcoming regulations - and specifically, how much financial risk CMS
will require providers to accept to earn APM incentives. Read more on the AHA website.

**NEWSLINKS**

- Racial bias in medicine leads to worse care for minorities | U.S. News & World Report
- New Joint Commission program aims to help hospitals meet eCQMs program | Becker's Infection Control & Clinical Quality
- Joint Commission shines spotlight on suicide in hospitals and other settings, with 8 steps to detect growing concern | Hospitals & Health Networks
- Top 10 sentinel events in 2015 | Becker's Infection Control & Clinical Quality
- High reliability: Excellent care every time | OR Manager
- 10 countries where Americans can save big on medical care | msn
- Hand hygiene TST helps hospitals reduce HAI rates | Bulletin of the American College of Surgeons

If you would like to be a Featured Physician, write for the Joint Commission's Physician blog, or have a topic you'd like to see us cover, please email us!