

Prescriptions for Reform

Patient Safety – A Key Ingredient of Any Reform

A Message from America's Hospitals

While the historic health care debate in Washington continues, we can't lose sight of ongoing efforts to assure better, safer care for patients and communities.

Across the country, hospitals are quietly reforming the way they work. This effort was sparked in part by a landmark report, *To Err is Human*, issued a decade ago by the Institute of Medicine. The report spotlighted medical harm and steps that could prevent it—and challenged the health care community to do better.

For the past 10 years, aggressive efforts have been underway to meet the challenges and address the lessons of the report. Doctors, nurses and other health care professionals have been changing the way they deliver care in an effort to make care better and safer.

How? For one thing, hospitals are harnessing the power of information technology and using bar codes to ensure the right medicine goes to the right patient at the right time. And many hospitals now have on-staff specialists whose job it is to focus exclusively on improving patient safety.

Hospitals also have tapped the expertise of other industries—for example adopting standard safety checklists originally developed by the aviation and nuclear power industries. The result? Hospitals are "hardwiring" excellence into their organizations. For



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example, for the past seven years, more winners of the Baldrige National Quality Award—the nation's highest presidential honor for organizational innovation and performance excellence—are from health care than any single sector.

Improving safety is both a daily challenge and a lifetime's work, and some ideas being considered in the health reform proposals before Congress could

spur further progress.

For example, the legislation would test whether restructuring payments could lead to better, safer patient care by encouraging collaboration and communication among providers. Patients could be better served by a group of providers working together. Pilot programs that allow hospitals, physician groups and other provider organizations to work together to manage a patient's care may eliminate some legal barriers to care coordination. Hospitals would welcome a leadership role in bringing these providers together. And under current reform proposals, clinicians would be able to tap into the best clinical evidence regarding the effectiveness of different treatments.

All of these ideas are a prescription for making care better and more affordable for all Americans. Now is the time to make it happen. To learn more, visit www.aha.org/Prescriptions.

America's Hospitals – Leading Change for Better Patient Care



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