Hospitals, clinics, and schools of health professions education, administration and public health operated by the Department of Defense, the Department of Health and Human Services, and the Department of Veterans Affairs (VA) play a vital role in our nation’s healthcare, delivering care and providing access to essential health and social services for our military and veterans. As in the civilian sector, federal health care is undergoing major changes primarily in response to closure of some medical facilities, budget constraints and changes to health benefits. Military and VA health leaders have said that there will be increased emphasis on wellness to address chronic conditions and changes in the delivery of care emphasizing teamwork and accountability for producing value and reducing costs. The AHA supports the unique role of these health care organizations and works for federal hospital leaders through collaboration and partnerships, leader engagement and involvement, and providing key resources and tools.

Outlined below are a few specific examples of how the AHA:

- Works for federal hospitals
- Engages federal hospital leaders
- Provides key resources

Working for Federal Hospitals

The primary mission of the AHA is to support the nation’s hospitals and health systems on issues that impact their organizations, patients and communities. The AHA ensures that members’ perspectives and needs are heard and addressed by national health care leaders, with the press, consumers and in the communities they serve. Examples of how the AHA has worked for federal hospitals are outlined below.

- **Strengthening Hospitals’ Ability to Serve Communities.** The AHA works across party lines – with Congress, regulatory agencies and the courts – to protect funding for civilian hospital services from arbitrary cuts and to decrease regulatory burdens that draw much needed resources away from patient care. This promotes the ability of hospitals and health care systems to better partner with federal clinics and hospitals as communities explore new ways to optimize local resources.

- **Facilitated Improved Health Care Access for Veterans.** The Veterans Choice Program (VCP) allows qualifying veterans to elect to receive hospital care and medical services from Veterans Affairs (VA) and non-VA entities and providers. AHA worked with the VA to further improve the VCP and veterans’ access to health care services.

- **Communicating with the Media.** As the national voice for hospitals, AHA uses a wide range of strategies to tell the hospital story in national and local news, traditional and social media, and print, television and radio. AHA also equips members with tools and strategies to help respond to media inquiries on difficult and challenging issues.

- **Meeting the Needs of Our Returning Military.** The AHA partnered with the Defense Centers of Excellence (DCoE) to help raise awareness of the medical, social and emotional challenges that the military face as they return home to their daily lives. The primary goal of this partnership was to ensure that returning service members find the support and resources they need.
Engaging Federal Hospital Leaders

Federal hospital leaders have a voice in the AHA through their active involvement in several forums.

- **A Role in AHA Governance and Policy-Making.**
  The AHA offers federal hospital leaders many opportunities to take an active role in shaping AHA policies and setting the direction for the association. They can play a formal role in association governance and policy formation by serving on the AHA’s Board of Trustees, Regional Policy Boards, Governing Councils and Committees. In addition, the association creates short-term advisory and work groups where members are asked to weigh in on more focused, short-term policy issues.

- **Executive Roundtables.** Federal hospital leaders are invited annually to meet with health care system CEOs from the civilian sector as well as AHA executives to discuss the latest health care delivery innovations and to provide their guidance to the AHA on specific and time-sensitive health care issues. Venues include the AHA Health Care Systems Leadership Retreat, Health Forum Summit, and ad-hoc committees and workgroups.

- **Committee for Clinical Leadership.** The Committee for Clinical Leadership (CCL) provides clinical input to the AHA advocacy and public policy process and serves as a clinical resource on policy issues. The CCL also reviews issues relating to standards and requirements for clinical education programs and activities and includes representatives from the medical, nursing and pharmacy fields.

- **Member Outreach.** Several times throughout the year the AHA’s federal hospital leaders are individually contacted by the AHA and/or are invited to participate in small group conference calls to discuss key AHA and health care delivery initiatives.

Providing Key Resources for Federal Hospitals

AHA offers federal hospital leaders myriad tools and resources to support their efforts and improve the health care delivery system.

- **Equity of Care.** Addressing disparities is essential for performance excellence and improved community health. AHA issued goals and milestones from the National Call to Action, launched in 2011, to end health care disparities and promote diversity. Goals include increasing the collection and use of race, ethnicity and language preferences, increasing cultural competency training, and increasing diversity in leadership. AHA encourages hospitals to take the #123forEquity Pledge to eliminate health care disparities. For more information, please visit www.equityofcare.org.

- **Cybersecurity Resources.** AHA offers cybersecurity resources for hospitals at www.aha.org/cybersecurity including cybersecurity alerts, links to tools to assist with risk assessment and gap analysis, and connections to opportunities for information sharing.

- **Comprehensive Telehealth Resource.** AHA offers a web resource with comprehensive information on telehealth available at www.aha.org/telehealth. The site includes information on telehealth initiatives, research documenting telehealth value, AHA-member case studies showing telehealth in action and AHA TrendWatch reports on telehealth benefits to patients.

- **Physician Leadership Forum (PLF).** AHA’s PLF seeks to foster strong collaborative relationships between hospitals and physicians through education, quality and patient safety, leadership development, and advocacy and public policy. Through webinars, seminars and reports, the PLF has focused on team-based care, physician competency development and physician practice management. For more information, please visit www.ahaphysicianforum.org.
• **Hospitals in Pursuit of Excellence (HPOE) Guides and Reports.** *Hospitals in Pursuit of Excellence* (HPOE), housed in AHA’s Health Research & Educational Trust’s (HRET), is a platform that shares action guides and reports on care delivery, operational excellence, safety and quality and population health to help accelerate performance improvement. An example of a current guide is the October 2016 *Preventing Patient Falls: A Systematic Approach from the Joint Commission Center for Transforming Healthcare Project.* More information can be found at [www.hpoe.org](http://www.hpoe.org).

• **Veterans Hiring Resource.** *Hospital Careers: An Opportunity to Hire Veterans*, found at [http://www.aha.org/advocacy-issues/workforce/veterans/index.shtml](http://www.aha.org/advocacy-issues/workforce/veterans/index.shtml), is a toolkit for hospitals with guidance on recruiting veterans into hospital careers. The resource aims to assist hospitals in hiring veterans with clinical experience, as well as talent and leadership skills beyond their medical credentials.

• **Resources to Promote the Role of Hospitals.** AHA initiated a digital campaign to help patients and consumers better understand the evolving role of the nation’s hospitals. Videos and other resources showing how hospitals are creating partnerships and programs that reach beyond their walls to improve community health and access to care can be found at [www.advancinghealthinamerica.org](http://www.advancinghealthinamerica.org).

• **Reports and Analyses.** AHA research reports include the *TrendWatch* series, a periodic AHA publication that reports on the latest trends affecting hospitals. Topics have included the promise of telehealth for hospitals and health systems and their communities. Other AHA-sponsored resources include *Chartbook* – a web-based publication that updates trends impacting hospitals as new data becomes available. It can be found at [http://www.aha.org/research/reports/tw/chartbook/index.shtml](http://www.aha.org/research/reports/tw/chartbook/index.shtml).

• **Hospital Data.** The AHA Annual Survey is completed online by most U.S. hospitals, both civilian and federal, and profiles a universe of more than 6,500 hospitals. It has more than 1,000 inputs covering an organization’s structure, service lines, staffing, expenses, physician organization structures, beds and utilization. The U.S. government and other organizations that rely on accurate hospital data, including U.S. News and World Report and Leapfrog, use this data source.

• **AHA Resource Center.** In AHA’s Resource Center, [http://www.aha.org/research/rc/index.shtml](http://www.aha.org/research/rc/index.shtml), highly trained information specialists assist members in accessing timely and relevant health services resources and data including quick facts retrieval, resource referrals and online articles and catalogues.

• **Fellowship Programs.** The AHA-National Patient Safety Foundation Comprehensive Patient Safety Leadership Fellowship is a year-long, intensive learning experience that develops leadership competencies and promotes a transformational model for patient safety and quality improvement. HRET developed the AHA Health Care System Transformation Fellowship for C-suite executives. The six-month program provides a roadmap of how to design and plan for new care delivery models. More information can be found at [http://www.hpoe.org/PSLF/PSLF_main.shtml](http://www.hpoe.org/PSLF/PSLF_main.shtml).