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Safety Net Hospital Programs Improve Quality and Reduce Costs
Programs highlighted today at Innovating Excellence event

Washington, D.C. – Effective quality improvement measures adopted by safety net hospitals can help address disparities to improve overall patient care and achieve high standards of quality, according to research highlighted today at an event hosted by the National Association for Public Hospitals and Health Systems (NAPH) and the Journal for Healthcare Quality (JHQ).

“Limited resources often force creative approaches to implementing best practices,” said Bruce Siegel, MD, MPH, president and chief executive officer of NAPH. “This event is an opportunity to showcase the innovative solutions that safety net hospitals are advancing every day. Their work is improving patient care and enhancing the health of their communities.”

Today’s event not only highlights hospital programs that improve quality and reduce costs, but also those that are featured in the first-ever JHQ issue focused exclusively on evidence-based care efforts at safety net hospitals. JHQ is the official peer-reviewed publication from the National Association for Healthcare Quality.

“This studies clearly show that achieving and maintaining high standards of health care quality is not significantly different for hospitals serving underprivileged patients,” said Maulik Joshi, DrPH, JHQ editor in chief. “In fact, the innovative methods used by safety net hospitals to address disparities in care, quality of care and costs of care are timely examples, as anticipated health-reform coverage expansion will bring more underserved patients through hospital doors.”

Event participants and their programs are described below:

- **Shauna Roberts, MD, Truman Medical Centers** – Social factors such as access to healthy food and preventive medicine often inhibit patients’ ability to take full advantage of available health care. Two unique, quality improving programs – Guided Chronic Care and Passport to Wellness – address these challenges, employing assertive care and providing social support for patients between medical encounters. Early indications show improved quality of care and significant reduction in costs, with patients empowered to better manage their conditions and make better use of the health care system.
• **Steven Lev, MD, Nassau University Medical Center** – “STAT” imaging studies provide vital results for providing evidence-based interventions in conditions such as stroke. A multiyear process of data collection and analysis led to the implementation of relatively simple departmental and hospital-wide system changes, including the distribution of STAT beepers and color-coded worklists, that have significantly improved communication of these critical results to clinicians improving patient care.

• **Linda Searle Leach, RN, PhD, University of California Los Angeles** – Preventable deaths occur when signs of risk are present, but not detected early enough. Rapid response teams (RRTs), also known as medical emergency teams, can be used to improve patient safety by preventing code arrests and death. At Santa Clara Valley Medical Center, where the research was conducted, the adoption of trigger alerts and RRTs, including early recognition rounds by RRT registered nurses, expanded the surveillance and identification of patients most at risk of clinical deterioration, thus saving lives.

Visit NAPH’s website for more safety net innovations. To learn more about the *Journal for Healthcare Quality* and the National Association for Healthcare Quality, please visit [www.NAHQ.org/jhq](http://www.NAHQ.org/jhq).

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**About the National Association of Public Hospitals and Health Systems (NAPH)**
NAPH represents the nation’s largest metropolitan hospitals and health systems, which fulfill a safety net mission of providing high volumes of care to low-income individuals. These facilities provide high-quality health services for all patients, including the uninsured and underinsured, regardless of ability to pay. In addition to functioning as the country’s default national health insurance system, safety net hospitals provide many essential communitywide services, such as primary care, trauma care, and neonatal intensive care. Safety net hospitals also train many of America’s doctors, nurses, and other health care providers. Since its inception in 1980, NAPH has cultivated a strong presence on Capitol Hill, with the executive branch, and in many state capitols. NAPH advocates on behalf of its members on such issues as Medicaid, Medicare, and access to health care services for vulnerable populations. For more information, visit [www.naph.org](http://www.naph.org).

**About the National Association for Healthcare Quality (NAHQ)**
Since 1976, the National Association for Healthcare Quality has served as an essential and interactive resource for quality and patient safety professionals around the world. Over 10,000 members and CPHQs turn to NAHQ for education, research, networking, certification, and resources designed to ease and improve their daily work. NAHQ’s vision is to realize the promise of healthcare improvement through innovative practices in quality and patient safety. Each program, initiative and alliance we initiate reflects our members’ values of excellence, integrity, innovation and collaboration. Visit [www.nahq.org](http://www.nahq.org) to learn more.