



Northern Arizona Healthcare

FY2025

Quality & Safety Report



Table of Contents

Celebrating our achievements	2
FY2025 outstanding achievements	3
Sustaining a culture of safety for all	4
Care management: connecting the dots	6
Ensuring equitable health care access	7
Improving timely care for strokes	8
Collaborative approach improves outcomes	9
Real lifesavers recognized at NAH	10
NAH Mini-Grants Program engages colleagues	11
Better together, everywhere: research and presentations	12



Celebrating our achievements

We are proud to share this report on our patient safety and quality of care successes during the 2024-2025 fiscal year. Northern Arizona Healthcare (NAH) has received major recognitions, including Leapfrog Hospital "A" Grades for both Flagstaff Medical Center (FMC) and Verde Valley Medical Center (VVMC), as well as best-in-state rankings for lowest Healthcare-Associated Infections (HAIs) for each hospital. NAH has also continued to improve its already high quality of care by increasing annual wellness visits, reducing pressure injury rates and significantly improving our Culture of Safety as measured in staff surveys. These accomplishments reflect safer care, healthier outcomes, and stronger trust from the patients and families who depend on us.

NAH continues to celebrate safety achievements regardless of size. NAH's Lifesaver Award, launched in May 2023, recognizes individuals and/or teams from any department who have gone above and beyond to improve safety for patients, co-workers or our community. NAH also recognized colleagues' continued safety efforts in the celebratory Hospital Safety Week from April 22-26, 2024.

Succeeding together

From frontline caregivers and technicians to behind-the-scenes staff, every NAH colleague supports the health and safety of northern Arizona. That's why our vision is *Always better care. Every person, every time... together*. It's also why one of our core values is *Be Better Together*.

Each of our colleagues' dedication, collaboration and commitment to excellence is undeniable looking at every achievement and award earned, but it's also evident in every patient we care for on their healing journey. In a time when health care is more complex and demanding than ever, these achievements are a powerful testament to the resilience and teamwork of our people. We couldn't celebrate these successes without every member of NAH working together to do their best for every patient, every time.

Thank you

We are incredibly proud of these external recognitions and pleased that those milestones show we have built a state-wide reputation as a leader in high-quality care. As we focus on our successes, we cannot overlook the tireless work and daily efforts of our colleagues to accomplish these achievements.

We know this is just the beginning – with the foundation of teamwork and excellence we have built, we are well-positioned to reach even higher performance levels in the years ahead. So join us in celebrating the milestones we reached in 2025, as these achievements confirm, without a doubt, that we are truly *Better Together*.



Sincerely,

A handwritten signature in blue ink, consisting of a large 'J' and 'L' intertwined.

Jake Lansburg
Vice President of Care Transformation and Quality
Northern Arizona Healthcare

FY2025 OUTSTANDING ACHIEVEMENTS

- **Spring 2025 Leapfrog Hospital "A" Grades:**

- VVMC received its fourth "A" grade in five rating periods.
- FMC received its fifth "A" grade in a row.

- **Best in State ranking as reported by the Arizona Department of Health Services:**

- FMC ranked No. 1 in Ariz. for lowest (zero) incidence of several Healthcare-Associated Infections (HAIs).
 - The HAIs include Central Line-associated Blood Stream Infections (CLABSIs), Catheter-associated Urinary Tract Infections (CAUTIs) and Methicillin-Resistant Staphylococcus aureus (MRSA).
- VVMC ranked No. 1 in Ariz. for lowest (zero) Clostridioides difficile infections (C. diff).
 - Of note: VVMC also reported zero MRSA, CLABSI or CAUTI cases, but was not eligible to be ranked for those infection rates due to a lower number of patients included in the reporting period.

- **Statistically significant improvements in colleagues reporting a sustained culture of patient safety in NAH's annual Employee and Provider Engagement Survey:**

- NAH improved its overall Culture of Safety score, increasing rank among health care organizations nationwide by **9 percentile points**, placing NAH in the **top 30% of participants**.
- NAH providers increased their overall Culture of Safety score by **24 percentile points**, driven heavily by significant improvements in "Resources and Teamwork" and "Pride and Reputation" domains.

- **Decrease in C. diff cases:**

- NAH decreased its number of reported C. diff cases to place in the 20th percentile in 2025, down from the 51st percentile in 2024 when compared to other health care organizations in the country.

- **Total compliance with every aspect of sepsis treatment and documentation measure exactly as required by CMS (Centers for Medicare & Medicaid Services):**

- NAH increased significantly from the 71st to 82nd percentile on the national benchmarking from CMS Core Measures.

- **Pressure injury performance per National Database of Nursing Quality Indicators (NDNQI) benchmarks improved from the 72nd to the 45th percentile**, which means we have had less pressure injuries during the scheduled studies than half of reporting facilities.

- **Increased Annual Wellness Visits at primary care clinics:**

- NAH increased Annual Wellness Visits by 15% in 2025 compared to 2024 visits. This means significantly fewer preventable hospital visits and overall improved health outcomes for patients.

- **By improving our patient throughput processes, we created capacity for an additional 737 patient discharges** compared to the prior year. The NAH Transfer Center also saw a **2% increase in accepted patients** and a **16% reduction in transfers** lost to other facilities.



SUSTAINING A CULTURE OF SAFETY FOR ALL

Just Culture

NAH is committed to creating a culture that prioritizes staff well-being and keeps our patients and colleagues free from harm. To this end, NAH utilizes the principles of Just Culture to promote a culture of safety for all.

In a Just Culture, unsafe conditions are proactively identified, errors are reported and analyzed, mistakes are openly discussed and suggestions for systemic improvements are welcomed at an organizational level. The focus of a Just Culture is on processes, not people, and finding how to address any causes that may lead to unsafe conditions. A Just Culture does not equal a blame-free environment, as individuals are still held accountable for compliance with safety practices. What differs in a Just Culture is that the organization holds itself accountable for any failure to support the individual and commits to correcting those practices.

The principles of a Just Culture are best supported when all individuals can practice leadership and build relationships, regardless of their role or title. We believe that culture is not built on what you proclaim, rather, it is built on what you practice, promote and permit. These unwavering standards allow colleagues to experience psychological safety while being encouraged to report safety events or near misses.

Safety event reporting and loop closure

NAH uses a safety event reporting process that affords leaders the ability to review, in real time, all safety concerns reported by anyone across the organization. Our teams report valuable information that is used to drive critical process improvements that have resulted in highly reliable care delivery. Though sometimes overlooked, one of the most important parts of the reporting process is closing the loop with the individuals who initially reported an issue.

Jessi Holt, RN, clinical manager of NAH's Flagstaff Cardiovascular Intensive Care Unit, has seen great value in communicating both issues and resolutions that come from safety reports.

"I find that it is best for our staff if we share with them what their voice does. They need to feel confident that their safety concerns will be heard and addressed. Following up on safety events and sharing them with my staff helps ensure effective communication and resolution between other departments, frontline staff and myself. Emphasis on safety and action toward improving our care and our practices is what our community deserves."



Jessi Holt, RN, clinical manager of Flagstaff Cardiovascular Intensive Care Unit

Connie Olofson, RN, clinical manager of Medical-Surgical Telemetry units at Verde Valley Medical Center, uses event reporting as a continual improvement process.

"I make safety event reporting a priority and see the importance in taking time to collect the information needed to really reflect on the event and think of how we could do better going forward. I think of it like a debrief. It's good to reflect on the event, find out if things went as intended and, if not, what needs to be done to help in the future."

NAH relies on event reporting as a driver of improvement and a reminder of our commitment to providing the highest quality care to our communities.



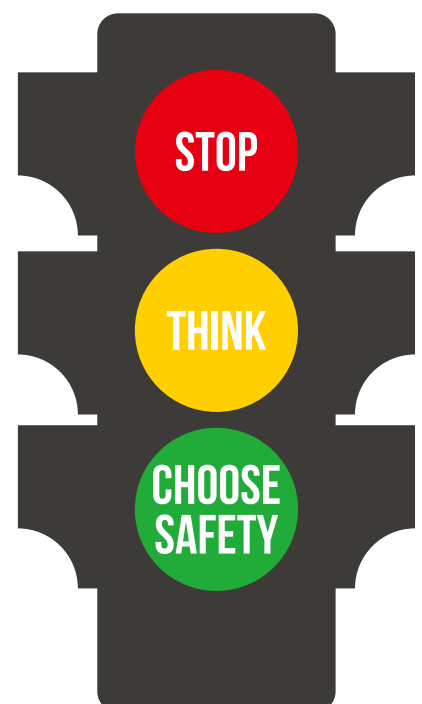
Connie Olofson, RN, clinical manager of Medical-Surgical Telemetry units at Verde Valley Medical Center

Survey says...

Every year, NAH assesses its Safety Culture as part of the annual Employee and Provider Engagement Survey. In FY2025, NAH achieved an increase of 9 percentile points in its national ranking for Safety Culture in the category of Prevention and Reporting. Compared to other health care employers in the country, NAH moved from the 61st percentile in 2024 to the 70th percentile in 2025. NAH is in the top 30% of health care organizations in the country for providing a culture of safety that focuses on preventing errors and promotes reporting errors as a way to improve.

As compared to FY2024, statistically significant increases in percentile rankings were seen in specific employee survey questions designed to assess the following:

- **34% increase** in staff perceptions related to the organization actively taking steps to improve patient safety
- **29% increase** in staff feeling that they are free to report errors/mistakes without fear of punishment
- **24 percentile point increase** in providers' recognition and acknowledgement of NAH's Culture of Safety



CARE MANAGEMENT: CONNECTING THE DOTS

Better Together in delivering comprehensive patient care

When a patient is ready to leave hospital care, they often need further health care services to continue their path to healing. There is an NAH team that seamlessly connects inpatient and outpatient services to ensure patients receive coordinated, comprehensive care throughout their health care journey, even if that care is outside of the NAH system.

This team, called Care Management, represents a vital bridge in health care delivery and its strength lies in how its inpatient and outpatient teams work together as a unified force, embodying the NAH value of Being Better Together.

Care Coordination: our inpatient foundation

Our Care Coordination Team ensures safe, effective hospital transitions by assessing each patient's individual needs and determining appropriate next-level care.

The team collaborates with physicians, nurses, social workers, and other providers to develop comprehensive discharge plans, coordinating with skilled nursing facilities, home health agencies, and outpatient services while ensuring patients and families understand their care requirements.

By proactively addressing discharge barriers, the team has achieved year-over-year improvements in average length of stay, knowing patients heal best in comfortable environments with appropriate care levels when ready.

Community Care Network: sustaining success

NAH's outpatient care management team, called the Community Care Network (CCN), focuses on high-risk patients who require ongoing support to optimize their health and avoid unnecessary readmissions. CCN focuses on our patients most vulnerable to complications or care gaps, providing targeted interventions that address both medical needs and social needs that impact a person's health and wellness.

From coordinating follow-up appointments to arranging transportation, securing medications or connecting patients with community resources, the outpatient team helps support our patients so they receive the care they need.

The power of integration

The true strength of Care Management emerges when the inpatient and outpatient teams function as an integrated unit. The handoff between inpatient and outpatient teams ensures continuity of care, coordinated communication and a seamless patient experience. This collaborative approach creates a care continuum where patients experience consistent support and advocacy.



FMC Care Management Team



VVMC Care Management Team

ENSURING EQUITABLE HEALTH CARE ACCESS

NAH's Health Equity Committee is a multidisciplinary, system-wide team of colleagues who collaborate to identify and reduce disparities in health care for the communities we serve.

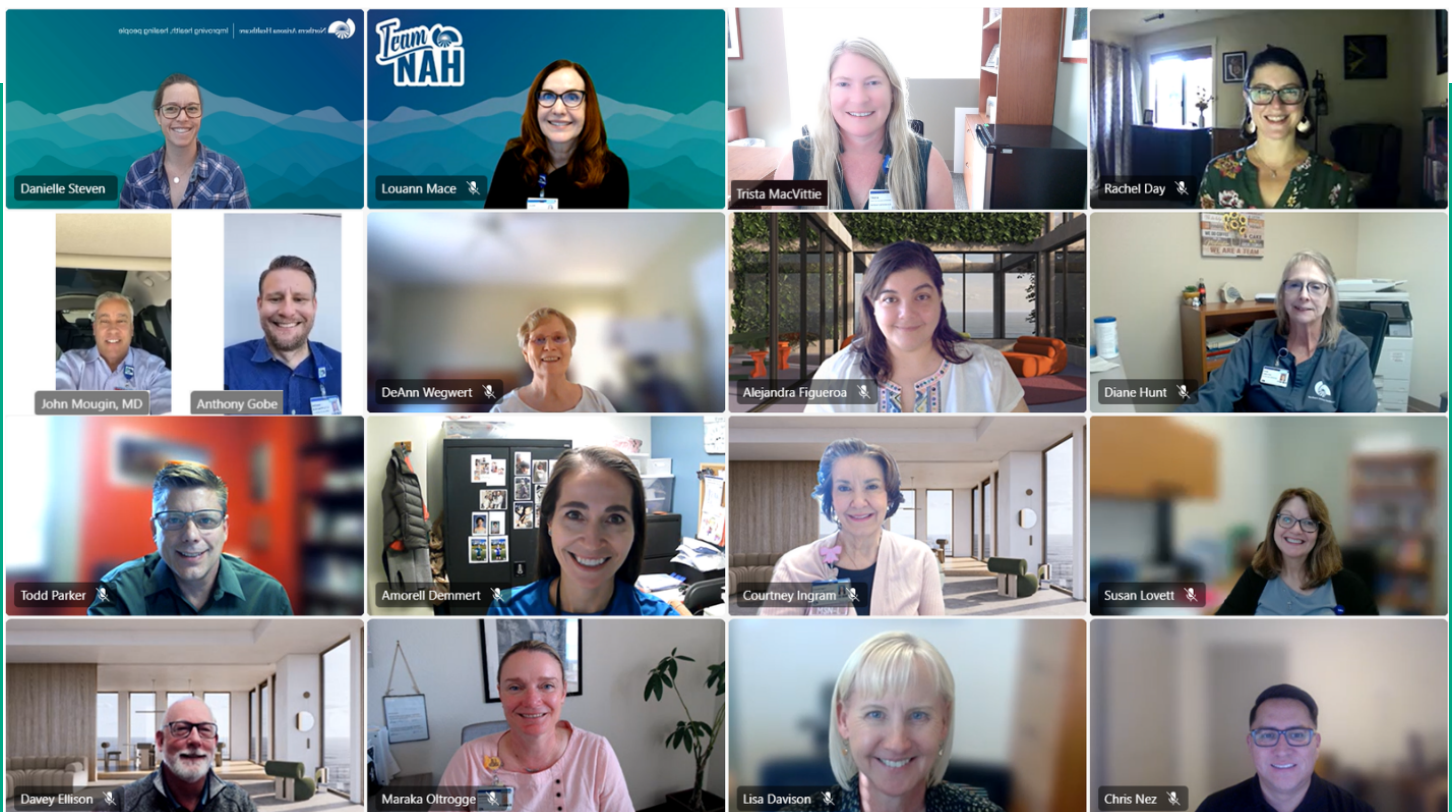
Health equity is broadly defined as fair access to – and outcomes of – health care to meet the unique needs of various individuals and populations. When we achieve health equity, we are helping everyone in our region live their best lives with the opportunity to achieve optimal wellness.

In FY2025, the NAH Health Equity Committee worked with various internal departments as well as community organizations to better understand and begin addressing some of the unique needs of our patient populations. For example, a new screening tool was used to collect information from patients about their housing, transportation, food, utilities and other social needs which resulted in distribution of over 1,000 community resource lists and over 600 referrals for care management support.

NAH Health Equity Committee representatives also connected with community members and external organizations to *Be Better Together* while listening to the voice of the customer. Discussions with groups such as Verde Valley Community Health Improvement Partners, Flagstaff Family Food Center and others helped the team find opportunities for alignment and partnership. We look forward to expanding our connections with community members and organizations in the coming year.



Health Equity Committee leadership, left to right: John Mougin, MD, committee executive sponsor; Lisa Davison, NAH director of care management; Rachel Day, committee operational lead



NAH's Health Equity Committee

IMPROVING TIMELY CARE FOR STROKES

In early 2024, VVMC was accepted into the American Heart Association's (AHA) Rural Health Care Outcomes Accelerator program. This three-year grant-funded program offers rural or smaller facilities the benefits of AHA's Get With The Guidelines – Stroke program, which includes learning collaboratives and quality-driven workgroups with other rural health care organizations in the United States.

The Rural Health Care Outcomes Accelerator program has shed light on initiatives we can implement to provide our patients with the earliest definitive stroke care. Some of these measures include decreasing the amount of time it takes to get brain imaging, ensuring necessary care occurs within an hour of the patient's arrival at a hospital and rapid transfer to stroke centers for thrombectomy when needed.



VVMC Stroke Committee (left to right): Breanna James, RN; Chrissy Cobban, RN; Jeffrey Roth, FNP; Danette Anderson, RN



FMC Stroke Committee (left to right): Daniel Peck; Brian D. Smith; Kimberly Hale, R.T; Jeremy Payne, MD.; Analisa Smith, RN; Nicole Bullard, RN

Since participating in AHA's stroke program, VVMC has elevated our evidence-based stroke care and continues benefiting from the vast evidence offered by the AHA on how to maintain and improve quality care and outcomes for our patients and our region.

In one quality measure—dysphagia screening for stroke patients—VVMC showed continued and significant improvement over the year, earning a prestigious position at the AHA annual stroke conference poster presentations.

We are also happy to share that within the first year of program participation, VVMC earned a Silver Plus award from the AHA, showcasing our commitment to excellent stroke care.



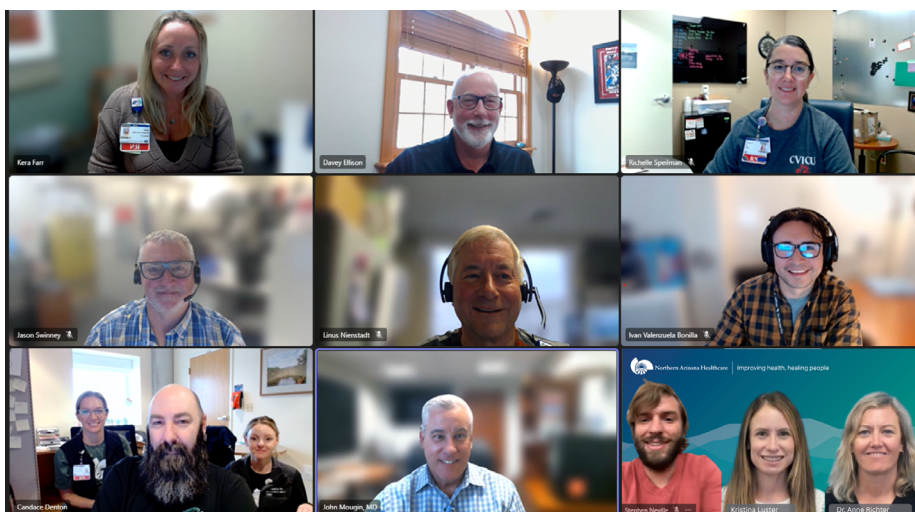
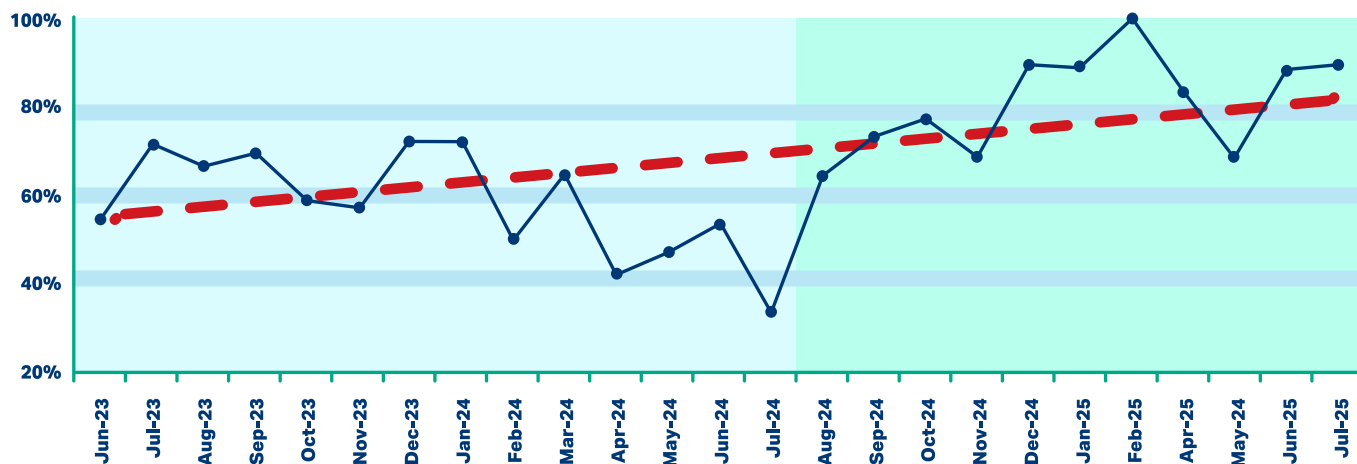
COLLABORATIVE APPROACH IMPROVES OUTCOMES FOR DEADLY INFECTION

Sepsis is a dangerous infection that can progress rapidly from mild symptoms to severe organ dysfunction within hours. With every hour of delayed treatment, a patient's risk of death increases by approximately 7-10%. This is why NAH is working to provide rapid identification and management of sepsis. The NAH sepsis workgroup has implemented a sepsis checklist tool to use as a guide in recognizing symptoms and the subsequent treatment that is needed. In addition, the Emergency Department (ED) at FMC is currently using an ED Sepsis Alert to move sepsis patients to the hospital area where they will get the best and quickest treatment.

"Focusing on sepsis improvement is vital for the health of our community. Through strong collaboration we are enhancing early detection and treatment of sepsis patients," explains Anne Richter, MD, Flagstaff emergency physician. NAH guides recognition and treatment with the nationally recognized sepsis bundle which enhances the management of sepsis with strict interventions and timelines. Sepsis bundle use with an 18% improvement year over year. This evidence-based work has led to a decrease in our sepsis mortality rate.

Davey Ellison, director of NAH's Emergency and Trauma Services, said, "Together, we are committed to advancing solutions that make a real difference in the lives of those affected by sepsis. We are very proud of the work that this group has accomplished this year and look forward to what they will achieve in the future."

NAH Sepsis Bundle Compliance



NAH's Sepsis Workgroup

REAL LIFESAVERS RECOGNIZED AT NAH

NAH has taken its commitment to Just Culture and safety event reporting one step further by celebrating significant examples of patient and colleague safety. The NAH Lifesaver Recognition Program acknowledges an individual or team who has gone far above and beyond their role to improve safety for patients, colleagues or the community. These recognitions encompass events within our health care system and beyond our clinical walls.

Since the award's inception in 2023, 24 Lifesaver recognitions have been awarded. Each award recipient has been recognized for their awareness, bravery and courage to jump into action when needed.

Recently, there was an exceptional event involving a colleague from our Care Coordination Department. Lexia Henderson, RN, was on her way to work when she witnessed a person collapse on the sidewalk. She stopped and recognized the person needed immediate care. She called 911 and began performing CPR. Our Guardian Medical Team arrived on the scene and continued care as they transported the patient to Flagstaff Medical Center to receive what turned out to be life-saving cardiac surgery. The patient made a full recovery and subsequently returned to NAH with his family to thank his care team and, most notably, his "lifesaver" from Care Coordination!

We appreciate the generous donations to Quality and Safety that allow us to recognize staff, like Lexia, who go the extra mile for patient safety. Lifesaver honorees receive a basket filled with a branded hydro flask and other tokens of our appreciation to thank them for their selfless dedication to keeping patients and colleagues free from harm.

Scan the QR code to donate toward celebrating our next lifesavers!



Lexia Henderson, RN, Lifesaver Award winner



Lexia pictured with grateful patient and his family

NAH MINI-GRANTS PROGRAM ENGAGES COLLEAGUES IN RESEARCH AND SOLUTIONS

The NAH Mini-Grants Program funds colleague projects that improve quality and safety at NAH. Through a competitive review process, a committee selects innovative, colleague-submitted projects that address strategic goals in safety, engagement and quality.

The Mini-Grants Program has provided seed money for projects that have added lasting value to our hospital system and the communities we serve. To highlight a few:

- 1. Harm-Reduction Vending Machines – NAH's Trauma Services and the Coconino County Health Department** now dispense naloxone, a medication that can reverse the deadly effects of opioid overdose, from a free vending machine outside of the FMC Emergency Department (ED). A year later, NAH Philanthropy supported a similar machine at the VVMC ED, in partnership with the Yavapai County Community Health Services.
- 2. Promoting Safe Sleeping for Newborns – NAH's pediatric units** were awarded funds to purchase sleep sacks as part of an initiative to raise awareness of safe newborn sleep positioning. Providing this at-home tool makes it easier for parents to continue safe sleeping practices after leaving the hospital.
- 3. Ultrasound-Guided Venous Access in Oncology –** Mini-grant funds were used to purchase a hand-held transducer and tablet. These tools are now used with oncology patients in the Infusion Room at FMC, improving visualization of vasculature and decreasing the number of attempts necessary to gain IV access.

The NAH Office of Research and Grants is thrilled to support these innovative, ground-breaking implementations that enable the organization and its caregivers to continually improve patient care.



Shawn Bowker, RN, with mini-grant-funded harm reduction vending machine



Colleen Little, RN, with mini-grant-funded sleep sack

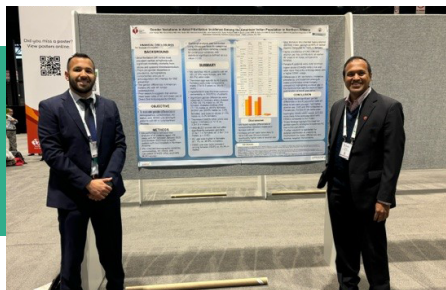


Erica Morefield, RN, and Laura Fox, RN, with mini-grant-funded venous ultrasound transducer

This year's round of mini-grant-funded projects include:

- Improving Heart Failure care through POCUS-Guided Assessment and Diuresis
- Home Blood Pressure Cuff Kits for Prenatal and Post-Partum Patients
- Monitoring Pediatric Growth via Telehealth and Remote Measurement Tools
- Mental Health Matters for First Responders Program Evaluation
- Tylenol and the Effect on Acute Traumatic Pain
- Increasing Hospital Staff Awareness and Action on Exploitation and Trafficking

BETTER TOGETHER, EVERYWHERE



Juan Vargas, MD, and Rangadham Nagarakanti, MD, present at the 100th Annual American Heart Association Congress in Chicago.



Analisa Patrick presents at the ACS Quality and Safety Conference.



Dani Ondayko-Lewis, RN, John Mouglin, MD, and Linus Nienstadt, RN, present at the Institute for Healthcare Improvement.

Select FY2025 publications, presentations, posters and abstracts

1. **Bamberg, K., Constable, J.**, with InsightRX partners. (2024). Pharmacokinetic-Pharmacodynamic Model of Unfractionated Heparin and aPTT From Real-World Adult Clinical Data. Webinar presentation to the International Association of Therapeutic Drug Monitoring & Clinical Toxicology.
2. **Bowker, S.**, Carter, V., Jain, T. (February 13-15, 2025). Multisite Tai Chi program enhances balance, confidence, and gait speed in seniors: Pilot study. [Conference presentation]. 50th Annual American Physical Therapy Association Combined Sessions Meeting, Houston, TX.
3. **Bradford, F., Mouglin, J., Nienstadt, L., Ondayko-Lewis, D.** (Dec. 8-11, 2024). Driven to ZERO CAUTI: Using the IHI Driver Diagram to Steer Committee Goals. [Conference presentation]. IHI Forum 2024, Orlando, FL.
4. **Deora, K., Singh, J., Kavathia, S., Gupta, M., Rocca, N.** (April 4, 2025). A first reported case of Evans Syndrome associated with hereditary hemochromatosis: Exploring immune dysregulation [Poster Presentation]. American College of Physicians Internal Medicine Meeting, New Orleans, LA.
5. **Lindquist, D., et al.** (May 30-June 3, 2025). Clinical Utility of [18F]fluoroestradiol (FES) PET/CT to guide 2nd line treatment decision in patients with ER-positive HER2-negative metastatic breast cancer progressing on 1st line endocrine therapy. [Conference presentation]. 2025 ASCO Annual Meeting.
6. **Nagarakanti, R.** (April 24-27, 2025). Prolonged PR, diastology, or RV dysfunction? Which patients are most likely to benefit from pacing for HFpEF? [Conference presentation]. Heart Rhythm Society Annual Meeting, San Diego, CA.
7. **Ondayko-Lewis, D.** (November 13, 2024). Achieving ZERO CAUTI: Our interdisciplinary committee journey. [Conference presentation]. ECRI & ISMP PSO Virtual Annual Meeting 2024, Orlando, FL.
8. **Patrick, A., and Mouglin, J.** (July 20, 2024) SSI Prevention Program: Northern Arizona Healthcare. [Poster presentation]. ACS Quality and Safety Conference, Denver, CO.
9. **Pradeep, R., Deora, K., Danca, E., Young, T., Mott, K., Chezick, A., Rocca, N., and Kudelka, A. P.** (Aug. 8-10, 2024). Unveiling the impact: Exploring malnutrition rates in patients with cancer and its association with anticancer treatments [Poster presentation]. American Society for Clinical Oncology Breakthrough Conference, Yokohama, Japan.
10. **Shaw, M., et al.** (Jan. 9-11). A descriptive study of EMS agencies by ambulance patient offload times. [Poster presentation]. National Association of EMS Physicians. San Diego, CA.
11. **Sinanan, R., Moshtaghi, A., & Koratala, A.** (2024). Point-of-care ultrasound in nephrology: A private practice viewpoint. World Journal of Methodology 14(4). DOI: 10.5662/wjm.v14.i4.95685.
12. **Vargas, J., Deora, K., Yadav, R., Ashraf, H., Nagarakanti, R., et al.** (Nov. 18, 2024). Atrial fibrillation in American Indians: Comparative analysis of characteristics and anticoagulation use for stroke prevention of atrial fibrillation. [Conference presentation]. American Heart Association Annual Conference, Chicago, IL.
13. **Wani, O., Chang, J., Kenkel, J., Ortiz, J., & Choi, M.** (April 3-5, 2025). Does early initiation of non-statin therapy, Evolocumab with LDL-C <50mg/dL contribute to the reduction of hospital readmissions in patients with ACS?: A single center real world evidence from ELAINE. [Poster presentation]. European Society of Cardiology, Milan, Italy.
14. **Yadav, R.** (March 29-31, 2025). Outcomes and procedural success of left atrial appendage occlusion in patients aged over 75 years: A retrospective cohort analysis. [Poster presentation]. 74th Annual Scientific Session of the American College of Cardiology, Chicago, IL.





Northern Arizona Healthcare

Thank You

