

begin “in small places, close to home . . . Unless these rights have meaning there, they have little meaning anywhere. Without concerted citizen action to uphold them close to home, we shall look in vain for progress in the larger world.”

Today we honor that message by honoring five people whose work close to home has made the whole world a better place. May their work continue to inspire us all for generations yet to come.

Lieutenant Colonel, read the citations.

[At this point, Lt. Col. Carlton D. Everhart, USAF, Air Force Aide to the President, read the citations, and the President and First Lady presented the awards.]

The President. Thank you for coming. Thank you for honoring these great people. Thank you for reminding us of all the important work still to be done, Belquis.

We’re adjourned. Thank you.

NOTE: The President spoke at 2:17 p.m. in Presidential Hall (formerly Room 450) in the Dwight D. Eisenhower Executive Office Building. In his remarks, he referred to Afghan refugee Belquis Ahmadi, who introduced the President; civil rights leader Rev. Jesse Jackson and his wife, Jacqueline; Commissioner Harold H. Koh, Commission on Security and Cooperation in Europe; Ambassador at Large for International Religious Freedom Robert A. Seiple; and President Boris Yeltsin of Russia.

Statement on Signing the Healthcare Research and Quality Act of 1999 December 6, 1999

Today I am pleased to sign S. 580, the “Healthcare Research and Quality Act of 1999,” which authorizes appropriations for the Agency for Health Care Policy and Research (and renames it the “Agency for Healthcare Research and Quality”) and authorizes a new grant program to support children’s hospitals with graduate medical education programs.

This legislation combines two important health care priorities of my Administration: first, ensuring that our Nation’s children, especially those who suffer from complex or unusual diseases, continue to receive the highest quality care that our health care system can provide; and second, developing the scientific evidence that we need to improve the quality and safety of our health care system.

The Act takes an important first step to ensure the delivery of high quality health care for America’s children by investing Federal funds in graduate medical education at free-standing children’s hospitals. This long overdue initiative was included in my Administration’s FY 2000 budget and was strongly advocated by the First Lady. Her leadership in this area is longstanding, and it is with great pride that I sign this groundbreaking legislation.

In an increasingly competitive health care market dominated by managed care, teaching

hospitals struggle to cover the significant costs associated with training and research as private reimbursements decline. Millions of American children each year are treated by physicians affiliated with or trained in one of 60 independent children’s hospitals across the country. While other teaching hospitals receive support for these costs through Medicare, children’s hospitals receive virtually no Federal funds, even though they train nearly 30 percent of the Nation’s pediatricians and nearly 50 percent of all pediatric specialists. This inequity exacerbates an already difficult financial situation for children’s hospitals, which often serve the poorest, sickest, and most vulnerable children. In many cases, they provide the regional safety net for children, regardless of medical or economic need, and they are the major centers of research on children’s health problems.

This Act creates a new grant program to provide much-needed support for the training of these critical health providers. I am pleased that the Consolidated Appropriations Act that I recently approved included my full \$40 million request to get this program started.

The Act also authorizes appropriations through 2005 for the Agency for Healthcare Research and Quality (AHRQ) and represents the culmination of a genuine bipartisan effort to

make better information available to health care decisionmakers to use to improve health care. AHRQ will help close the numerous data gaps throughout the health care delivery system. It will also serve as a bridge between the best science in the world with the best health care in the world.

The AHRQ will build on the foundation of strong scientific approaches to health services research established by the Agency for Health Care Policy and Research. This legislation was passed on an overwhelmingly bipartisan basis by the Congress, which is a tribute to the many members of both chambers, from both sides of the aisle. I particularly want to single out Senators Frist and Kennedy and Congressmen Bliley, Dingell, Bilirakis, and Brown, who have championed quality information for quality health care, for their commitment to this important reauthorization.

The AHRQ is now designated the lead Federal agency in health care quality to help meet the needs of decisionmakers and work in partnership with the private sector. AHRQ will de-

velop a national report on quality, stimulate evidence-based medicine, sponsor primary care research, help eliminate medical errors, and apply the power of information systems and technology in a manner that assures adequate patient privacy protections. AHRQ will also be a principal source of research that will guide health plans, purchasers, health care systems, clinicians, and policymakers as they seek to improve access to health care and make it affordable for all Americans.

I am delighted to sign S. 580, which will support research needed to improve health care and help train new pediatricians and pediatric sub-specialists who will be able to put this knowledge to work for America's children.

WILLIAM J. CLINTON

The White House,
December 6, 1999.

NOTE: S. 580, approved December 6, was assigned Public Law No. 106-129.

Remarks on Improving Health Care Quality and Ensuring Patient Safety and an Exchange With Reporters

December 7, 1999

The President. Good morning, everyone. I'd like to thank Secretary Herman, Janice Lachance, and the other representatives of the Federal Government who are here. I'd like to thank the leaders representing consumers, health care providers, business, labor, and quality experts who are here. This is a very impressive group of Americans who have come together to discuss the question of reducing medical errors.

Last week the Institute of Medicine released a disturbing report about patient safety and medical errors in our Nation's health care system. According to the study, as many as 98,000 Americans lose their lives each year as a result of preventable medical errors. Up to 7,000 die because of errors in prescribing medicine. And the cost of all these errors add as much as \$29 billion to our medical bills.

But this is about far more than dollars or statistics. It's about the toll that such errors take

on people's lives and on their faith in our health care system. We just had a terrific meeting this morning to talk about what we can do to save lives, to prevent errors, to promote patient safety. We have the finest health care system in the world, the best professionals to deliver that care. But too many families have been the victims of medical errors that are avoidable, mistakes that are preventable, tragedies, therefore, that are unacceptable.

Everyone here agrees that our health care system does wonders but first must do no harm. Now let me be clear about one thing: Ensuring patient safety is not about fixing blame; it's about fixing problems in an increasingly complex system, about creating a culture of safety and an environment where medical errors are not tolerated. In short, it's about working together to zero in on patient safety and zero out preventable errors. This morning's meeting builds