



INTERLOCUTOR

WINTER 2022

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NEWS FROM THE DFW HOSPITAL COUNCIL

The Human Side **of Health Care**

*DFWHC radio
program to
continue for
third year on
KRLD 1080 AM*



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Steve Love

President/CEO
Dallas-Fort Worth
Hospital Council

Improvement, but still falling short

ACCORDING TO A RECENT REPORT from the Centers for Disease Control and Prevention, the number of pregnancy-related deaths in the U.S. rose in 2020, the first year of the pandemic. The report finds there were 23 deaths per 100,000 births, which is up from 20 in 2019. The report did not examine what role the pandemic played in the increase, but it could have been related to people delaying visits to healthcare providers. The report also cited racial disparities as the maternal mortality rate for Black women was three times higher than white women. The U.S. has the highest maternal death rate among developed countries and is the only industrialized nation where numbers are increasing.

Black women in Texas are “disproportionately” impacted as they account for 11% of live births but 31% of maternal deaths. Texas has the highest number of uninsured residents in the U.S. and the highest percentage of uninsured women of childbearing age. According to “Babyscripts,” a virtual maternal care company, Black women have higher rates of preterm birth, low birthweight and increased infant mortality. Black women are most likely to be uninsured, fall into coverage gaps when Medicaid is not expanded and experience higher rates of chronic disease. The upcoming **Black Maternal Health Week** (April 11-17) will focus on these challenges.

Some of the leading causes of maternal death include infection, hemorrhage, preeclampsia and cardiovascular conditions. Studies indicate 80% of maternal deaths are preventable. Many of the symptoms include severe headaches, dizziness, vision impairment, fever, swelling in the hands or face, vaginal bleeding, difficulty breathing and suicidal thoughts. If you have friends with these symptoms, listen to their concerns and encourage them to seek immediate care. You can also go with them to the provider and offer to talk with her doctor.

In an effort to address maternal deaths, the American Rescue Plan Act enacted by Congress and signed into law by President Joe Biden in 2021, allows states to extend Medicaid coverage for a full year postpartum. Our most recent legislative session addressed postpartum coverage. The Texas House passed a bill to extend our postpartum coverage to 12 months. We thank the Texas House for this meaningful legislation and applaud them for addressing disparities in maternal healthcare. Unfortunately, when the bill went to the Texas Senate, the legislation was modified to reduce the coverage to six months. While we are glad to have increased maternal coverage, the legislation fell short of what is needed in Texas, though allowed by Medicaid.

When our legislature convenes next year, two items that will save lives in Texas is to extend postpartum coverage to 12 months and expand Medicaid coverage to approximately 1.5 million Texans. Many of these uninsured residents are people of color.

We can help the maternal mortality problem in Texas by working collaboratively for increased healthcare coverage, access and outcomes for the good of all Texans. ■

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INTERLOCUTOR

EDITORIAL

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Managing Editor **Chris Wilson**

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INTERLOCUTOR

1: one who takes part in dialogue

2: one in the middle of a line who questions end people and acts as leader




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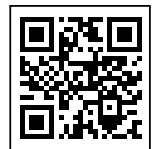


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RADIO GA GA!

DFWHC's "The Human Side of Health Care"
to continue through 2022 on KRLD 1080 AM



THE DFW HOSPITAL COUNCIL (DFWHC) WILL CONTINUE TO BE “RADIO GA GA” in 2022 as it was announced in December its weekly program “The Human Side of Health Care” was renewed for the upcoming year on **NewsRadio KRLD 1080 AM**. The DFWHC Board of Trustees approved the continuation of the radio broadcast during its December meeting. The program, airing Sundays from 1:00 – 2:00 p.m. and 7:00 – 8:00 p.m., CDT, has showcased the activities of North Texas hospitals throughout 2021. The broadcasts have run continuously since January 2020.

POSITIVE FEEDBACK

“We have received such positive feedback from our hospitals and the public, we decided to continue the program for another year,” said **Stephen Love**, president/CEO of DFWHC. “Since the outbreak of the COVID-19 pandemic, the program has become an important soundboard for North Texas doctors and epidemiologists to create public awareness. We believe it is important to continue to provide this service to North Texas residents.”

MORE THAN 120 GUESTS

During the past year, “The Human Side of Health Care” has hosted more than 120 guests to include television news anchors, hospital executive officers, physicians, bestselling authors and even the owner of the Dallas Mavericks conversing on such topics as heart disease, the social determinants of health, home safety hazards and COVID-19 vaccines.

AUDACY STATION

An Audacy station, NewsRadio KRLD 1080 AM serves the DFW Metroplex and North Texas with a news/talk radio format. It is a Class

A station broadcasting at 50,000 watts, the maximum power allowed for American AM stations. It has a listening range covering a 30-county area of North Texas and Oklahoma. It is also broadcast nationwide on Radio.com.

HOSTS

Love will continue to work with Thomas Miller, co-host and broadcast journalist at KRLD, to develop the upcoming year’s programming. Each one-hour broadcast includes three separate topics. Programs will be posted online on Spotify, Apple Podcasts, Stitcher, Google Play, iHeart Radio and YouTube.

TOPICS

“We’re proud to showcase the extraordinary work being done by our hospitals within our communities,” Love said. “We will work with hospital executives to determine guests and topics for each program. In addition, we hope to create awareness on numerous health care issues in North Texas to include COVID-19 while emphasizing that we must continue to remain vigilant.” ■



GUESTS
more than
120



EPISODES
more than
110



COUNTIES
more than
30



TOPICS
more than
200



KRLD
NewsRadio
1080



*Sunday's at
1:00 and 7:00 pm, CDT*

The Human Side **of Health Care**



with Stephen Love (left) and Thomas Miller.





Dr. Shadi Damanpour



Ryan Eason



Dr. Megan Fitzpatrick



Dr. Tu Le

THE DFW HOSPITAL COUNCIL (DFWHC) RADIO program “The Human Side of Healthcare” is broadcast on a weekly basis through 2022 on **KRLD 1080 AM**.

Hosted by DFWHC President/CEO **Stephen Love** and KRLD’s **Thomas Miller**, the program has showcased the activities of North Texas hospitals while providing crucial COVID-19 updates.

You can listen to past broadcasts online at Spotify, Apple Podcasts, Google Play, Stitcher, YouTube and iHeart Radio.

Guests during the winter have included:

- **Matthew Albers**, Cook Children’s Healthcare System;
- **Cindy Burnette**, Texas Health Resources;
- **Dr. John W. Burruss**, Metrocare Services;
- **Sheyla Camacho**, Parkland Health & Hospital System;
- **Dr. John Carlo**, Prism Health North Texas;
- **Dr. Yinn Cher Ooi**, Texas Health Harris Methodist Hospital FW;
- **Dr. Sumeet Chhabra**, Texas Health Presbyterian Hospital Plano;
- **Mark Cuban**, Dallas Mavericks NBA team;
- **Dr. Shadi Damanpour**, North Dallas Dermatology Associates;
- **Dr. Cesar Dias**, Texas Health Harris Methodist Hospital FW;
- **John Drake**, Baylor Scott & White Irving Foundation;
- **Ryan Eason**, Medical City Healthcare;
- **Dr. Megan Fitzpatrick**, Baylor University Medical Center;
- **Dr. Tonya Fuqua**, Fuqua Advanced Dental;
- **Dr. Robert Haley**, UT Southwestern;
- **Ryan Haley**, Texas Health Resources;
- **Janet St. James**, Medical City Healthcare;
- **Dr. Tu Le**, Texas Health Harris Methodist HEB;
- **Dr. Brian Lima**, Medical City Heart Hospital;
- **Cheryl Malone**, Medical City Children’s Hospital;
- **Dr. Andrew Masica**, Texas Health Resources;
- **Dr. David Nelson**, Parkland Health & Hospital System;
- **Percy Paclibar**, Texas Health Resources;
- **Danelle Parker**, Texas Health Resources;
- **Diane Partin**, Medical City Green Oaks;
- **Dr. Claudia Perez**, Texas Health Harris Methodist Hospital FW;
- **Liz Petty**, Parkland Health & Hospital System;
- **Dr. Angela Price**, Children’s Health;
- **Perla Sanchez-Perez**, Parkland Health & Hospital System;
- **Dr. Ruby Shah**, Texas Health Presbyterian Hospital Plano;
- **Dr. Tiffany Simms-Waldrip**, Children’s Health;
- **Laura Sonefeld**, Cook Children’s;
- **Dr. Cesar Termulo**, Parkland’s Hatcher Station Health Center;
- **Dr. Srinivas Yallapragada**, Medical City Las Colinas. ■

Your feedback is welcome. For information, please do not hesitate to contact radio@dfwhc.org.



DFWHC announces 2022 Board of Trustees

THE DALLAS-FORT WORTH HOSPITAL COUNCIL (DFWHC) HAS ANNOUNCED its Board of Trustees for 2022. The Board of Trustees consists of the following individuals:



Blake Kretz



Becky Tucker



Vanessa Walls

- Chair **Blake Kretz**, President, Texas Health Arlington Memorial Hospital;
- Chair-Elect **Becky Tucker**, President, Texas Health Harris Methodist SW Fort Worth;
- Past Chair **John Phillips**, President, Methodist Dallas Medical Center;
- Trustee **Michael Sanborn**, President, Baylor Scott & White All Saints – Fort Worth;
- Trustee **Dr. Roberto de la Cruz**, Exec. VP, Chief Clinical Officer, Parkland;
- Trustee **Dr. Seth Toomay**, Assoc. VP, CMO, UT Southwestern Medical Center;
- Trustee **Dr. Karen Duncan**, President/CEO, JPS Health Network;
- Trustee **Sharn Barbarin**, CEO, Medical City Lewisville;
- Trustee **Jessica O’Neal**, CEO, Medical City Las Colinas;
- Trustee **Audra Early**, Senior VP, Strategy and Network Development, Kindred Hospitals;
- Trustee **Vanessa Walls**, President Northern Market, Children’s Health;
- Trustee **Kyle Armstrong**, Chief Operating Officer, Baylor University Medical Center;
- Ex-Officio **Natalie Wilkins**, Chief of Staff to President/CEO, Cook Children’s;
- Ex-Officio **Robert Rupp**, CEO, Ennis Regional Medical Center, Parkview Regional;
- Ex-Officio **Dr. Christopher McLarty**, Associate VP and CNO, UT Southwestern.

Completing their terms are **David Berry**, former President, Strategic Capital Projects at Children’s Health; **Christopher York**, former President of Baylor Scott & White Medical Center – Grapevine; **Richard Carter**, former President/CEO of Hunt Regional Medical Center; and **Dustin Anthamatten**, VP of Operations and Finance, Methodist Charlton Medical Center. New to the Board are Walls and Armstrong. Rupp and McLarty were appointed as new ex-officios.

“We’re excited about the new additions to our 15-member board representing a talented group of North Texas healthcare executives,” said **Stephen Love**, president/CEO of DFWHC. “They have a broad range of experience so valuable to our mission to improve quality healthcare in the region. We would like to thank David Berry, Christopher York, Richard Carter and Dustin Anthamatten for their dedicated work over the past years.” ■

Hall Render and BKD announced as top DFWHC Year-Round Sponsors for 2022



THE DFW HOSPITAL COUNCIL (DFWHC) IS PROUD to announce **Hall Render** and **BKD CPAs and Advisors** will serve as Year-Round Sponsors for 2022. The designation allows the two companies to be the top sponsors at all major DFWHC events including the 74th Annual Awards Luncheon in October. They will also host a series of complimentary webinars in 2022 for hospital members.

Hall, Render, Killian, Heath & Lyman, P.C. is a national health law firm with offices around the country. With more than 50 years of experience and nearly 150 attorneys serving health care clients, Hall Render is recognized as one of the nation's preeminent health law firms. Clients include large and small business entities from a wide variety of industries, nonprofit organizations, private individuals and major health care providers.

Hall Render's Texas office in Dallas serves the hospital and health care industry throughout the South. Hall Render's team of health law attorneys is dedicated to serving its clients in the South and across the nation. Hall Render can be reached at **214-615-2000** and <https://>

www.hallrender.com/office/dallas-office/.

BKD is a national CPA and advisory firm that can help you reach your goals. In addition to tax and audit services, BKD's healthcare practice encompasses one of the industry's largest and longest-tenured teams of regulatory compliance and reimbursement services and performance improvement services advisors. Their dedicated healthcare pros can leverage their expertise to help you apply the financial, operational, and clinical lessons learned so you can be better prepared to survive and thrive when the next inevitable disruption occurs.

BKD recently announced a merger of equals with **Dixon Hughes Goodman (DHG)**, which will create a new, Top-10, national professional services firm. This merger, which will be effective June 1, 2022, will expand the breadth of service offerings and deepen the resources to serve health care clients. You can contact BKD at **972-702-8262** or <https://www.bkd.com/industries/healthcare>.

For information on Year-Round Sponsorships, please contact **Chris Wilson** at chrisw@dfwhc.org. ■

Around DFWHC

Creamer becomes President of Baylor Scott & White

IT WAS ANNOUNCED IN FEBRUARY that Julie Creamer will join **Baylor Scott & White Health** as president effective March 7. In her role, she will oversee the health system's clinical, operational and information services functions.

Creamer joins from **Northwestern Medicine** based in Chicago, where she started her career more than 40 years ago as an intensive care nurse. She steadily advanced into roles including chief transformation executive and chief nurse executive. In addition to providing regional oversight, she most recently served as president of the system's anchor research hospital, Northwestern Memorial Hospital—a top-10 academic medical center—as well as president of its rehabilitation hospital.

“With decades of clinical and administrative experience earned at a leading integrated academic health system, Julie will strengthen our operational excellence and



complement our strong leadership team,” said **Pete McCanna**, CEO of Baylor Scott & White. “Her proven ability to advance customer-focused strategies, coupled with her frontline experience, will advance our delivery of high-quality care.”

Creamer holds a Master of Science degree from the University of Illinois Chicago and a bachelor's degree in nursing from Marquette University. She will be based at Baylor Scott & White's administrative office in Dallas. ■

Jay deVenny named CEO of Medical City Children's



JAY DEVENNY, FACHE, was named chief executive officer for **Medical City Children's Hospital** and **Medical City Women's Hospital Dallas** in January.

deVenny has served as chief development officer of Medical City Dallas since 2016. He previously served

as the vice president of business development and the assistant vice president of neuroscience, oncology and orthopedic services. He has led development initiatives of key services Medical City Children's Hospital including a world-class congenital heart program, pediatric oncology, pediatric orthopedics and trauma. In addition, he supported physician partnerships at Medical City Women's Hospital Dallas, which is expected to deliver a record number of babies in 2022.

“Jay has a proven track record of strategic leadership that helped ensure our hospitals are the destination of choice for women and children,” says **Chris Mowan**, CEO at Medical City Dallas. “I am confident that Jay will lead Medical City Children's Hospital and Medical City Women's Hospital Dallas to the next level of healthcare excellence.”

deVenny holds a Master of Business Administration in Health Services Management from the University of North Texas and a Bachelor of Science in Communication Studies from the University of Kansas. ■

Duncan is new President and CEO of JPS

DR. KAREN DUNCAN WILL SERVE AS THE NEW President/CEO for **JPS Health Network**, the JPS Board of Managers announced in November. She assumed her role in January.

Duncan follows **Robert Earley**, who led Tarrant County's publicly supported healthcare system for 13 years. Duncan was formerly Chief Operating Officer at JPS, having joined the network in 2017.

"It is a testament to the strength of JPS that we found the right person to lead the health network into the future within our own ranks," said **Dr. Charles Webber**, chairman of the JPS Board of Managers. "Dr. Duncan has been a steadfast champion of providing our community with the care they need and deserve, and I look forward to her leadership."

Duncan has been responsible for transforming the community health network of medical homes and clinics and led the implementation of the JPS Future Plan, which was supported by Tarrant County's most recent bond. She



has worked in leadership at Grady Memorial Hospital in Atlanta and Cook County Health and Hospitals System in Chicago. Prior to JPS, she was a Principal at healthcare consulting firm Health Management Associates.

The JPS network includes 25 community locations that provide primary care, behavioral health, pharmacy services and the county's only Level I Trauma Center. Duncan is also a member of the DFW Hospital Council Board of Trustees. ■

O'Neal named CEO of Medical City Las Colinas

JESSICA O'NEAL, FACHE, was named CEO of **Medical City Las Colinas** in November. Since 2018, O'Neal served as the chief executive officer of Medical City Children's Hospital and Medical City Women's Hospital, leading all programs while launching world-class congenital heart and fetal surgery programs.

"Jessica has a proven track record of strategic leadership and dedication to patient-centered care certain to benefit patients from the greater Irving and Las Colinas area," says **Erol Akdamar**, FACHE, president of Medical City Healthcare. "With more than 15 years of experience, I am confident Jessica will lead Medical City Las Colinas to the next level of healthcare excellence."

She also serves on the Board of Trustees of the DFW Hospital Council. ■

Associate Members



SEXUAL Harassment and ASSAULT Allegations

no longer subject to
mandatory arbitration

ON THURSDAY, FEBRUARY 10, 2022, the Ending Forced Arbitration of Sexual Assault and Sexual Harassment Act of 2021 passed the Senate after previously passing in the House. The bill, which **President Joe Biden** will reportedly sign, would amend the Federal Arbitration Act and effectively transform how parties resolve allegations of sexual harassment and assault.

The bill would permit a claimant alleging sexual assault or sexual harassment to elect that a pre-dispute arbitration agreement is invalid and unenforceable.

In other words, the agreement is not automatically unenforceable, but the claimant can elect to proceed with their case in court. The bill does not prohibit the parties from agreeing to arbitrate after the dispute arises. Similarly, a claimant is permitted to elect to pursue a class or collective action in court alleging sexual assault or harassment even if a pre-dispute agreement says otherwise.

The bill is not expressly limited to employment. In theory, any claimant with a pre-dispute agreement is

This article was submitted by **Hall Render**. For information, please contact Chris Wilson at chrisw@dfwhc.org.



enforcement of any state or local laws that regulate when a claim of sexual harassment or assault can be brought to a court for resolution.

With the building pressure since the #MeToo movement's exposure of sexual harassment and sexual assault, the legislation will allow claimants public recourse in the courts if they choose to do so. While the arbitration process has often been viewed by defendants as speedier and less costly, the decision whether to proceed in court or in arbitration is now taken out of the defendant's hands and is left to the complainant's discretion.

The liability from harassment claims can be considerable. While the damages for claims brought under Title VII are capped, Title IX has no cap on damages, and allegations of harassment often give rise to other state law claims as well as punitive and non-economic damages.

Practical Takeaways

Once the bill is signed by President Biden, claimants in sexual harassment or sexual assault cases will no longer be limited by pre-dispute agreements allowing them to proceed only in arbitration or forbidding them from seeking class or collective action relief other than through arbitration.

Employers, education facilities, non-profit organizations and other institutions with potential liability for such claims should ensure best practices in their policies and procedures. Utilizing best practices will substantially decrease the risk of harassment-based liability and, in case of a lawsuit, show that the organization exercised reasonable care to prevent and promptly correct the alleged harassing behavior. If you have any questions, please contact:

- **Claire Bailey** at cbailey@hallrender.com; or
- Your primary Hall Render contact.

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covered under the bill. Thus, an employee, student or independent contractor can elect to invalidate a pre-dispute agreement when alleging sexual harassment or sexual assault.

Notably, the bill does not purport to be limited only to future arbitration agreements. Instead, the bill appears to apply to existing pre-dispute agreements. In other words, an accuser bound by an existing arbitration clause would be free to elect proceeding in court with a claim of sexual harassment or sexual assault. The bill also prohibits the

Associate Members



BKD & DHG merge for national growth strategy

THE LEADING ACCOUNTING FIRMS of **BKD CPAs & Advisors (BKD)** and **Dixon Hughes Goodman (DHG)** jointly announced on February 17 they would merge to create a new, Top-10, national professional services firm with \$1.4 billion in revenue, setting the stage for a national growth strategy.

With complementary operations, geographies in North Texas and nearly two centuries of legacy service between them, the two firms will operate under a new name that will be announced at a later date. The new

firm will provide deep industry focus, expanded advisory services and outstanding career opportunities, building the foundation required for long-term growth and a stronger national presence with a gateway to global expansion. The merger of equals is expected to close in the second quarter of 2022, subject to the satisfaction of customary closing conditions.

Tom Watson, current CEO of BKD, will serve as the CEO of the new organization; and **Matt Snow**, current CEO of DHG, will serve as the Chair. The two industry leaders

Together, as one organization, we will deepen our bench strength even further.

said the merger will create a firm that is primed for growth in the current business landscape.

“For years, both BKD and DHG have built strong reputations as high-value, professional client service firms,” said Watson. “We’ve established complementary geographic footprints and strong capabilities in a range of critical service sectors. Together, as one organization, we will deepen our bench strength even further, allowing us to continue to serve our existing client base while also providing the resources necessary to serve an ever-increasing upstream client base.”

Snow added that the strengths of the two companies will help clients better navigate the dynamic commercial landscape.

“I couldn’t be more thrilled to join forces with BKD. The scale of our combined firms, our collective talent and similar cultures will translate to tremendous benefits for our clients and team members,” said Snow. “Both of our firms have an overlapping industry focus in healthcare, financial services and private equity, coupled with other industry sectors where each legacy firm is individually strong. As one organization, we will be able to bring our capabilities to a broader range of clients, providing more innovative, client-centric services to the market.”

The new firm will have a significantly larger national presence, ranked number 8, allowing it to quickly pivot to new market opportunities as they arise and expand its reach. **It will have more than 5,400 team members across 68 markets in 27 states, including the United Kingdom and the Cayman Islands.** For clients, this brings greater opportunity for more onsite, personalized attention from professionals, regardless of location. Key merger highlights are as follows.

Strategically Compelling for Both Organizations

- Builds a national firm with \$1.4 billion in revenue, uniquely positioned to deliver outstanding

opportunities for team members and clients.

- Merges two, well-established firms with strong operating histories spanning nearly 100 years.
- Positions the firm for continued growth, expanding the breadth of services available to each firm’s current client bases while deepening the resources required to serve larger private and Fortune 1000 advisory clients.

Beneficial for Clients and Team Members

- Broadens geographic reach, placing experienced talent in several key markets to provide onsite services more efficiently.
- Builds scale in key industry areas and client service segments, creating synergies within existing industries and expanding the reach of others to a total of 10 national industry practices.
- Builds new career development opportunities across industry verticals and geographic locations.
- Improves national market recognition, supporting growth of non-audit related services to better serve clients, including those in the Fortune 1000.
- Positions the firm as a destination employer with a people-driven culture.

About BKD

BKD CPAs & Advisors ranks among the nation’s Top-15 professional services firms. The firm offers clients a variety of services in accounting, audit and assurance, and tax as well as risk management, technology and cybersecurity, wealth management, valuation services and more. BKD employs approximately 3,300 dedicated professionals who serve clients in all 50 states and in myriad industries. Visit www.bkd.com for additional information.

About DHG

With more than 2,100 people in 13 states, Dixon Hughes Goodman ranks among the nation’s Top-20 professional services firms. Offering comprehensive assurance, tax and advisory services, DHG focuses on major industry lines and serves clients in all 50 states as well as internationally. Visit www.dhg.com for additional information. ■



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PERSPECTIVES

INSIGHTS & INSPIRATION IN HEALTHCARE MARKETING

Building a “Fan Factory” from positive patient outcomes.

One of the best forms of healthcare marketing is building a Patient Testimonial Program. It is authentic and will certainly be shared by word of mouth with friends and family. However, the thought of this endeavor may create anxiety for you.

Instead of the usual canned Patient Testimonial Program splashed across healthcare homepages, consider using an authentic grass-roots approach.

Yet no amount of dread will circumvent the ever-present need for the evangelization of positive patient outcomes. To meet the growing demands of patients as consumers, healthcare organizations have to find ways to share great experiences of their customers as a means of promoting a healthcare organization’s brand. One way is through a Patient Testimonial Program. However, is that the best or even most effective way to meet the needs of the consumer-driven mindset potential patients use when considering their healthcare options? In short – probably not (but it sounds great in a board meeting).

It’s a fact that 92% of consumers believe what other consumers tell them about a brand experience. To meet this basic

axiom of consumer psychology, healthcare organizations need to develop a pipeline of patient outcomes that support their brand in the market. Instead of the usual canned Patient Testimonial Program splashed across healthcare homepages, consider using an authentic grass-roots approach that promotes dialogue and builds a bona fide “Fan Factory.” Here’s how:

1. Determine Your Sweet Spot

Whether it’s spectacular pediatric care or an amazing trauma center, most healthcare organizations can point out where they broadly excel. These are the areas you should consider promoting when building a “Fan Factory” for your organization. It’s important to select specialties that are understood by the broader public and then find patient evangelists who can meet your marketing needs. Which brings us to our next point...

2. Utilize Your Clinician Network

Sadly, most healthcare marketing professionals don’t hear the success stories of their organizations until long after the fact. In marketing, you must strike while the iron is hot, which means mobilizing your people on the front line (i.e. clinicians) to help you identify patients and their families that had great outcomes. Publicly express the need to identify great success stories to your organization and then provide an easy way for clinicians to share them with you.

3. Vet. Vet. Vet.

Once you’ve identified some potential patient evangelists, ask LOTS of questions, and make sure they are the right ones to represent your healthcare brand. When you are considering a grassroots approach to implementing a Patient Testimonial Program, you don’t have to ensure the person is camera-ready, instead consider how you might be able to leverage their community to benefit your organization. For example, if your sweet spot is children’s health, then find well-connected moms and help them host teas/dinners/luncheons about children’s healthcare and share their stories of hope with other parents.

Regardless of the particular grassroots approach, finding a way to foster direct conversation between patient evangelists and their targeted network can create a veritable “Fan Factory” for your organization. This supports the consumer-driven mindset of patients and builds your brand image from the ground up. It’s a win-win.



About the author

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Katten

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Katten is committed to partnering with the

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*to advance quality health care in the region and to
celebrate the great health care leaders of North Texas.*

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- Metropolitan Anesthesia
- Moss Adams
- Multicultural Alliance
- NextGate
- North Central Texas Trauma Regional Advisory Council
- OnPlan Health by Flywire
- OSPECS Consulting, LLC
- Presbyterian Communities & Svc.
- Protiviti
- Priority Power Management
- Providers Association for Home Health, Hospice and Healthcare, Inc.
- PYA, P.C.
- Seagoville Economic Development
- Southwest Transplant Alliance
- Tap Report
- Tarrant County College District
- TCU and UNTHSC School of Medicine
- TCU Harris College of Nursing and Health Sciences
- Texas Healthcare Advisory Council
- Texas Healthcare Staffing, Inc.
- Texas Tech University Health Sciences Center School of Nursing
- Texas Woman's University – College of Nursing
- The Beck Group
- U.S. Army Medical Recruiting
- Unity Medical Alliance, LLC
- University of Texas at Dallas
- VNA of Texas
- Wello, Inc.
- YMCA of Metropolitan Dallas



Jennifer Miff

President, DFWHC Foundation
Senior Vice President, DFWHC

Leverage MyIQ Analytics’ state data access for learning and grants

THE DALLAS-FORT WORTH HOSPITAL COUNCIL (DFWHC) FOUNDATION HAS A RICH HISTORY of supporting patient safety improvements, quality analyses and metrics, and community health use cases through its robust, longitudinal data sets.

A little-known fact, however, is that the DFWHC Foundation also offers subscription-based access plans to the comprehensive state data known as the **Texas Health Care Information Council (THCIC)**. Our academic partners and community-based organizations can benefit from the DFWHC Foundation’s **MyIQ Analytics** platform access to inpatient and outpatient hospital discharge data from across the state.

Academic partners who already have access to THCIC as a state educational institution or current data subscriber can use the DFWHC Foundation MyIQ Analytics platform to access the full case-level data set to conduct research related to chronic disease hospitalization rates, social disparities in vulnerable populations, and critical community health issues such as fall risks and mental and behavioral health. This tool is versatile and a great way to empower students with real data to enrich their analytics learning in clinical informatics and statistics. Professors can also utilize the data set to design new tasks and lessons within existing and/or new curriculum and teach students how to conduct analyses on hospital discharge data, such as measuring quality outcomes, market share, and community health statistics.

For community-based organizations, an aggregate-level THCIC subscription can provide valuable insights to support grant applications or board strategies. This data set allows analysis of state-wide data on disease incidence rates, health issues related to social determinants of health, and community health statistics such as suicide or childhood asthma. Access to this data will allow community-based organizations to prioritize initiatives and create better data-driven funding applications that clearly delineate community-based issues and quantify the problem to support grant objectives. Leveraging the DFWHC Foundation’s data after a grant is received, in many cases, can allow for more effective grant outcomes tracking and impact reporting.

We are excited to be able to extend these options to our partners. For more information on leveraging THCIC data in your organization or at one of your community-based partners, please contact **Theresa Mendoza**, director of data management and research at the DFWHC Foundation, at tmendoza@dfwhcfoundation.org. ■

How to contact us

972-717-4279

info@dfwhcfoundation.org



www.dfwhcfoundation.org

Foundation Mission

Inspire continuous improvement in community health and healthcare delivery through collaboration, coordination, education, research and communication.

Foundation Vision

As the trusted “go to” resource, inspire collective improvement of health and healthcare outcomes.

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Jennifer Miff
DFWHC Foundation



Dr. Matt Murray



Pamela Stoyanoff

Foundation announces 2022 Board of Trustees

The Dallas-Fort Worth Hospital Council (DFWHC) Foundation has announced its Board of Trustees for 2022. The Board of Trustees consists of the following individuals:

- Chair **Dr. Matt Murray**, Pediatric Emergency Physician, Cook Children’s;
- Vice Chair **Pamela Stoyanoff**, Executive VP/COO, Methodist Health System;
- Secretary **W. Stephen Love**, President/CEO, DFWHC;
- Trustee **Jan Compton**, Chief Patient Safety Officer, Baylor Scott & White Health;
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- Trustee **Dr. Joseph M. Parra**, Division CMO, Medical City Healthcare;
- Trustee **Catherine Oliveros**, VP Community Health, Texas Health Resources;
- Trustee **Matt Chance**, Senior VP Operations, Scottish Rite for Children;
- Ex-Officio **Jennifer Miff**, President, DFWHC Foundation.

Murray will serve as chair while Stoyanoff becomes vice chair.

“We appreciate the noteworthy contributions of our board of trustees representing an impressive group of North Texas healthcare executives,” said **Jen Miff**, president of the DFWHC Foundation. “They bring a wide range of experience that will assist us in achieving our mission in 2022 to improve healthcare through collaboration, education and research. We offer our thanks to Dr. Matt Murray and Pamela Stoyanoff for continuing to lead the DFWHC Foundation Board.” ■

Around DFWHC Foundation



Hospital leaders decide to postpone annual Employee of the Year Luncheon to 2023

FOLLOWING DISCUSSIONS WITH DFW Hospital Council (DFWHC) hospital leaders in February, it was decided to postpone the 25th Annual Employee of the Year Luncheon to next year. The event, originally scheduled for April 28, 2022, is expected to be rescheduled in April 2023 at the Hurst Conference Center.

“This was a very difficult decision for us,” said **Jen Miff**, president of the DFWHC Foundation. “The North Texas healthcare workforce has been bravely dealing with the COVID-19 pandemic now for over two years. It was decided in the best interest of the health of our workforce and community, that a large in-person event would not be a good idea at this time.”

For the past 25 years, the event has been held each

April to honor exceptional hospital employees in North Texas. In the tradition of an awards show, winners are announced at the luncheon and asked to come to the stage to receive their award.

“We hope to move forward from the pandemic and shift our focus to recognizing our employees and volunteers for great work they do in the hospitals all of the time,” Miff said. “We will continue to look for ways to recognize and say ‘thank you’ to the great people who make a difference in our healthcare community. We appreciate your support in this effort.”

For questions, please contact **Sally Williams**, workforce center director at the DFWHC Foundation, at workforce@dfwhcfoundation.org. ■

Foundation's Workplace Violence Committee releases "Call to Action"

THE DALLAS-FORT WORTH HOSPITAL COUNCIL (DFWHC) FOUNDATION'S new Workplace Violence Committee released its official "Call to Action" in February.

Hospitals and systems participating on the new committee formed in 2021 include **Baylor Scott & White Health, Children's Health, JPS Health Network, Medical City Healthcare, Methodist Health System, Parkland Health & Hospital System, Texas Health Resources, UT Southwestern, VA North Texas Health Care System and Wise Health System.**

In 2019, U.S. hospitals recorded 221,400 work-related injuries and illnesses, a rate of 5.5 work-related injuries and illnesses for every 100 full-time employees. These numbers are almost twice the rate for the country's private industry. A report by the American Hospital Association estimated that workplace violence cost U.S. hospitals approximately \$2.7 billion annually.

The Committee adopted the following definition of healthcare workplace violence:

"Workplace violence is defined as an act or threat occurring in the workplace that can include any of the following: verbal, nonverbal, written or physical aggression; threatening, intimidating, harassing or humiliating words or actions; bullying; sabotage; sexual harassment; physical assaults; or other threatening disruptive behaviors of concern involving staff/employees, licensed practitioners, patients, customers or visitors.

We support the belief that healthcare personnel should be able to work in healthy environments free of abusive behavior, threat of injury or assault.

We recognize that healthcare personnel have a personal responsibility to themselves and their profession to have a culture where violence is not tolerated. They should take the lead in creating safer work environments.

We believe violence in the healthcare setting threatens the delivery of effective patient services and therefore, patient safety. If quality care is to be provided, healthcare personnel must have a safe work environment and respectful treatment.



We support healthcare personnel as advocates for policies and programs that advance abuse, harassment and violence-free workplaces through a comprehensive workplace security and violence prevention program.

We support the identification of patients upon admission to healthcare services who have a history of violence, without violating their privacy as provided by legislation.

We support initiatives and legislation at the local, state and national levels that promote comprehensive and collaborative approaches to address violence in healthcare settings that are consistent with our health and safety positions.

We foster research and education that improves practice with regard to workplace violence, creating an awareness of safety issues and best evidence-based practices.

We endorse collaborative efforts by healthcare organizations to develop systems for reporting and analyzing workplace violence to promote an organization reflective of a "culture of safety."

We ask the community to support this position to minimize violence against healthcare workers in our North Texas hospitals."

For information, please contact **Patti Taylor** at **ptaylor@dfwhcfoundation.org**. ■

Around DFWHC Foundation

Sepsis Strike Force Webinar

THE DFW HOSPITAL COUNCIL FOUNDATION'S Sepsis Strike Force webinar "What's New in Antimicrobial Stewardship" originally broadcast on Tuesday, January 25 has been posted online.

Matt Crotty, Pharm.D., BCIDP, Clinical Pharmacy Specialist, Infectious Disease, Antimicrobial Stewardship, served as guest speaker.

You can view the webinar at <https://www.youtube.com/watch?v=RpERXwpQdfQ>.

For questions, please contact **Patti Taylor** at ptaylor@dfwhcfoundation.org. ■



Matt Crotty, Pharm.D., BCIDP
Clinical Pharmacy Specialist
Infectious Disease, Antimicrobial Stewardship

Foundation's mental health "Recovery Workshop" to be held throughout 2022



THE DFW HOSPITAL COUNCIL (DFWHC) FOUNDATION'S Community Health Collaborative (CHC) hosted its "Recovery Workshop: ROCC Stars Unite" program on Sunday, January 23.

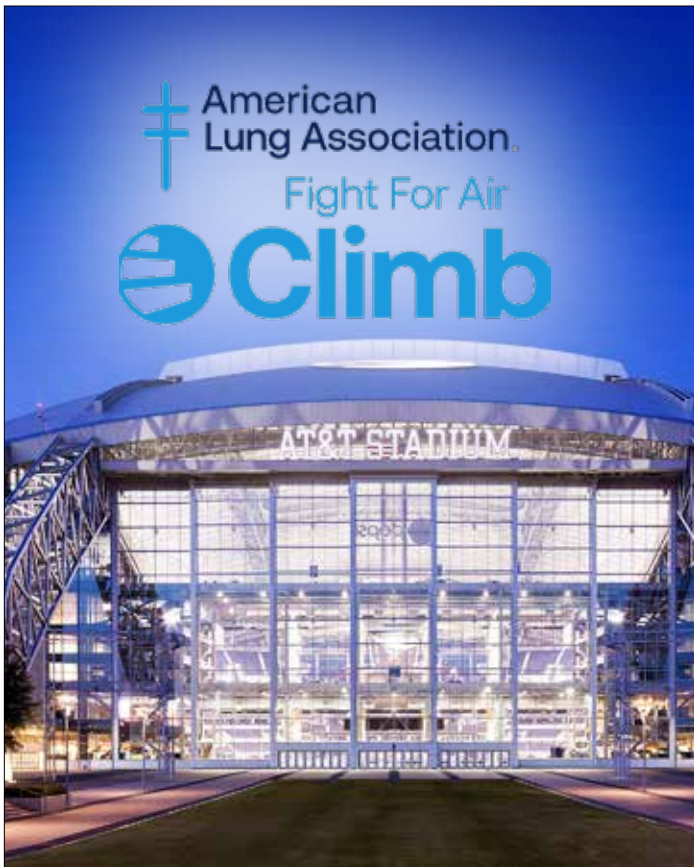
Working with **UT Southwestern Medical Center**, the **Association of Persons Affected by Addiction** and the **National Alliance of Mental Illness North Texas**, the program creates awareness and educates participants about the key concepts of mental health and addiction recovery.

These free virtual seminars are interactive and are suitable for all participants no matter their background or experience.

Future events will be held throughout 2022.

For information, please email mhfantx@dfwhcfoundation.org.

The program is supported by the Community Mental Health Grant Program from the Texas Health and Human Services Commission (HHSC). The Community Mental Health Grant Program was established by House Bill 13, 85th Legislature, Regular Session, 2017 and authored by Representative Four Price. The 86th Legislature appropriated \$45 million in 2019 to continue the Community Mental Health Grant Program in 2020 and 2021. ■



Fight for Air Climb set for May 14 in Arlington

THE AMERICAN LUNG ASSOCIATION will host its annual **Fight for Air Climb Event for North Texas** on **May 14** at 8:00 a.m., CST at the Dallas Cowboys' AT&T Stadium in Arlington.

Participants will raise funds to support the mission of the American Lung Association while climbing stadium stairs and walking the concourse of AT&T Stadium.

Former Dallas Cowboy football players **Ed "Too Tall" Jones** and **Drew Pearson** will be at the event to meet and greet participants. People can either climb or walk. Get your teams together and challenge other departments at your company and have fun for a good cause!

Be one of 1,000-plus and register to join the Fight for Air Climb in-person event or choose a virtual option and challenge yourself at famous landmarks.

You can register at https://action.lung.org/site/TR?pg=informational&sid=9151&fr_id=22215.

For information, please contact **Dolores Johnson** at dolores.johnson@lung.org or 214-631-6854. ■

Foundation's virtual "Opioid Discussion" held Jan. 20

THE DFW HOSPITAL COUNCIL (DFWHC) FOUNDATION continued its live virtual "**Opioid Discussion**" with the topic "Legal vs. Illegal Opioids" on Thursday, January 20.

Guest speaker was **Denise French**, Mental Health First Aid Out Reach Worker.

French has been with the Texas Council of the Local Mental Health Authority for more than 10 years, serving as a teacher of Mental Health First Aid Training for nine years.

The complimentary event was attended by clinicians, physicians, nurses, healthcare workers, community health workers and community members/consumers.

For information on future events, please contact **Patti Taylor** at ptaylor@dfwhcfoundation.org. ■





Danny Davila

Director, FCRA Regulatory Risk & Consumer Compliance Advisor
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What is a background report provider?

THE BACKGROUND REPORTING INDUSTRY has a wide range of providers that can promote their reports as valid. But true value is in the accuracy and timeliness of the reports. As this industry continues to progress, consumer reporting agencies have increased access to a wide range of data and sources to complete requests. Here's a few variables to consider when assessing background report providers.

More than ever before, the need for quality audit reviews of raw data is mandated for criminal research due to movements towards the redaction of date of birth and other personal identifiers. Primary data sources are continuing to use online tools to issue information to consumer reporting agencies. But alternatives need to be secured. Consumers – also known as job candidates – are knowledgeable of their rights under the Fair Credit Reporting Act and hold employers and consumer reporting agencies accountable. Like other industries, background reporting cannot rely on antiquated systems to ensure accurate information. Process evaluation and workflow improvement inspires continuous evolution to compete. Clients who request background reports have strict budgets which place consumer reporting agencies in situations requiring creative flexibility. Let's not forget the impact of the COVID-19 pandemic.

Quality audits require a review of raw data. It's not an easy process, involving the accurate matching of information. Due to the mentioned movements towards increased redaction of private info, quality audits are necessary to ensure accuracy. Consumer reporting agencies that bypass this process for cost or faster turnarounds eventually issue flawed reports.

A key factor when collecting data is the reliability of the source. Sloppy research could produce a report that can lead to disputes and possibly result in fines, not to mention bad hiring decisions. Technology has provided a boost, effectively reducing the need for hard copy documents. As we've experienced, even the best of systems will have occasional downtimes. Court systems and their reporting agents must have alternatives available such as on-site researchers to obtain the records.

Lessons learned during the pandemic also made the industry more flexible, inspiring adjustments to the use of employees and tools when investigating data.

As in any industry, if a price looks too good to be true, it probably is. Background reporting requires quality resources, accurate data, viable/tested and secure technology, and a partner that understands these business needs. ■



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BURNOUT among employees during pandemic challenges bosses

MORE WORKERS HAVE REPORTED FEELINGS OF BURNOUT since the pandemic began more than two years ago. According to a 2021 study, more than half the workers surveyed reported a decline in their mental health.

The pandemic has blurred the lines between work and home environments. Employees feel more pressure to respond to work messages quickly and to respond after-hours. They find it hard to take a break from their technological devices.

On top of that, the exodus of employees from the workforce means that remaining employees are spread thin. The rising workload spread amongst fewer employees has further fueled the burnout dilemma.

How Employers are Handling Burnout

Companies desperate to retain employees are searching for ways to curb burnout. The consensus is that it will take more than yoga sessions or meditation apps to fix the problem. The tight labor market requires employers to compete. Many employers are seeing attrition despite increases in financial incentives and other perks.

According to pre-pandemic surveys conducted by MetLife, 60% of employees said that mental health should not be their employer's responsibility. When employees were surveyed again in 2021, 62% said mental well-being should be handled with employer assistance.

Team Check-Ins

Team interventions have a positive impact on decreasing burnout. Research compared employees whose managers consistently checked in with them personally and professionally to a control group. It was discovered employees had lower mental stress levels and were 40% less likely to quit.

Flexibility Around Personal Commitments

The flexibility to complete work around an employee's personal commitments also helps reduce burnout. Some managers have been cutting out superfluous meetings.



Boeing announced a company-wide policy of meeting-free Fridays. The aerospace giant has also given managers discretion to offer white-collar workers more flexible work schedules.

Expanding Time Off

The race for talent on Wall Street has led to new wellness perks. At Goldman Sachs, they are offering employees more time off for bereavement leave and pregnancy loss leave. Employees who have been with Goldman Sachs for at least 15 years are eligible for six weeks of unpaid sabbatical leave.

Company-Wide Holidays

Company-wide holidays have also been implemented to curb burnout. German software company SAP created a companywide mental-health holiday. In June 2021, the female-founded dating app Bumble gave 800 employees an entire week off for mental well-being, while a few employees remained staffed to provide essential functions. Alternative arrangements were made with those few employees to also give them a break.

Clear Communication

One barrier to curtailing burnout has been that employees are unable to communicate with managers about unrealistic workloads. A lack of manager support, as well as a lack of communication channels with managers, rank among the largest contributors to worker burnout. ■

ESCALATION at work – it can happen anytime

IN THE WORDS OF “Anchorman” Ron Burgundy, “Boy, that escalated quickly.”

While we admit NFL football and a dollar will likely not even get you a cup of coffee at Starbucks, a couple of on-field incidents provide a great example of escalation in the workplace.

In a Washington Football Team game with the Dallas Cowboys on December 26, defensive tackles **Jonathan Allen** and **Daron Payne** began throwing punches at one another following an angry disagreement on the sideline. Both players would have to be separated, creating a chaotic if not embarrassing incident on live television.

Let’s not forget **Antonio Brown**, the Tampa Bay Buccaneers’ wide receiver during a January 2 game. In the third quarter, Brown became clearly agitated after an argument with his coach **Bruce Arians**. Multiple teammates attempted to calm him, but Brown took off his jersey, and angrily ran off the field. And so Brown, a Hall of Fame talent, was immediately cut by the team.

These incidents should remind executives and human resource (HR) directors of one of the more unpleasant aspects of managing employees. From time to time, you need to handle people who have lost their temper. Perhaps you have just discharged an employee. Maybe two employees are arguing. Perhaps an employee is dealing with a mental condition that suddenly alters behavior. What is the best way to respond?

The first consideration should always be safety. Not just for yourself and your coworkers, but for your angry employee. If you believe a situation can potentially be harmful, don’t hesitate to contact law enforcement. The lone consideration should not be removing the angry employee from the building. If you believe the person is not in a good frame of mind to drive, pay for an Uber.

It’s always a good idea for HR professionals to



seek training so they are familiar with “de-escalation techniques.” When employees are so angry they are not in a logical frame of mind, or perhaps they are dealing with a medical condition, common ways to help people calm down may not work. The person who has lost control is more than just an angry employee, they are a traumatic presence to everyone in the office.

Restraining the employee or even approaching them could create a violent situation. De-escalation training will help you recognize these behaviors and get the person to a point where they listen to reason, decreasing the boiling situation to a simmer.

After the incident, it’s a good idea to delay any decisions on their employment. Take time to consider what happened. Usually, these situations have many moving parts. Consulting your employment counsel will help you work through the Americans with Disabilities Act (ADA), the Family and Medical Leave Act (FMLA), and other state laws before you make a final decision.

As seen on the NFL football field, things can indeed escalate quickly in the workplace. The key is to attempt to bring the person in for a safe landing. Prepare yourself now so your turbulent situations at work do not escalate to dangerous levels. The safety of your coworkers and your angry employee may depend on it. ■

5 REASONS a background check might be delayed

TRAUMATIZED IS PROBABLY TOO SOFT A WORD when describing our reaction to the famous **Weather Storm Uri** which slammed into Texas on February 13, 2021. Well, almost one year later on February 2, winter arrived yet again. A huge Artic cold front rolled into Texas with 48 hours of freezing temperatures and ominous sleet.

So, as our GroupOne Background Screening team began to batten down the hatches, we considered reasons a background check could possibly be delayed. Please note, we have no plans to be late with any of the background checks requested by clients. Every day a position goes unfilled is a day your company isn't operating at full potential. When delays take place, it can be frustrating. Here are five common factors that could lead to the unfortunate delay.

1. Weather Delays

While many processes are automated, there is no nationwide database of all the information needed for an accurate background check. Oftentimes, GroupOne relies on researchers and local offices to obtain the report. If these offices are closed due to inclement weather, requests can go unanswered until the staff returns.

2. Inaccurate and Incomplete Data

When employers and candidates make mistakes or provide only partial information, such as entering an inaccurate social security number or misspelling a name, the entire screening can be delayed. In many cases, these oversights are not detected until midway through the process, pushing your check back to square one. To avoid such problems, advise your data entry team and applicants to be careful entering all information.

3. Changing Federal/State Regulations

The laws surrounding background checks vary from one region to another, leading to extra quality control if your



candidate has a connection to multiple jurisdictions. For GroupOne, navigating these regulatory issues without creating a compliance violation is a must as we put our expert touch on every report, ensuring only compliant information is reported back to you.

4. Outside Party Delays

Regardless of the speed of our team, as a consumer reporting agency (CRA) we are often at the mercy of outside parties. For example, previous employers and colleges may not respond to our requests in a timely manner. When such delays take place, we will keep you posted throughout the process.

5. Court Record Access

Though many jurisdictions offer online portals to seek out information, there are still many states that do not. This means a researcher may need to hand over a list of names to a clerk and the clerk has to pull files – sometimes a slow process. Many courts have also cut staff, with searches only taking place a couple of days a week. Believe it or not, several states still utilize snail mail. Over the past 30 years, our GroupOne team has forged great relationships with the courts and their clerks. But take it from us, clerks do not like to feel rushed. If such delays take place in these “slow” locales, we will keep you posted throughout the process.

Delays can be frustrating. We get it. But GroupOne never settles for a second-rate process that cuts corners. We take pride in offering accurate background checks to clients no matter company size or industry. ■

How 'bout that Super Bowl Halftime Show?!

THE SUPER BOWL HALFTIME SHOW on February 13 was viewed by over 29 million households, featuring a lineup of 90's hip-hop royalty, including **Dr. Dre, Snoop Dogg, Mary J. Blige** and **Eminem**. Soon after the show, Facebook and Twitter feeds began filling up with comments – some good, some not so much.

The 60-plus set did not think the halftime show was particularly groovy, while many Millennials were probably “gettin’ jiggy with it.” Jokes aside, the stark differences between generations are not isolated to social media squabbles. These generational differences can also create conflicts in the workplace.

Today’s workforce is composed of four generations: **Baby Boomers** (1946–1964), **Generation X** (1965–1980), **Millennials** (1981–2000) and **Generation Z** (2001–2020). Each generation has their own expectations on how they see the world and the role work plays in their lives. Employers need to understand these differences to create a thriving workplace and avoid miscommunication.

Technology

The most obvious example of generational differences involves technology. Millennials and Generation Z grew up with electronics and social media. Baby Boomers and Generation X are accustomed to using more traditional kinds of communications and may prefer face-to-face interactions to texting and instant messaging.

Work Environment

Boomers and Gen Xers are generally considered more loyal and trusting of authority; more willing to work long hours; and more desirous of titles and external recognition. In contrast, Millennials and Gen Z, who were raised during economically turbulent times marked



by recessions are less likely to sacrifice a life balance to advance their careers. Millennials crave autonomy and expect their work to align with their passions. Consequently, they are more likely to push back on workplace rules and expect greater accountability from managers. Likewise, employees from younger generations may also demand more flexibility and working remotely.

Benefits

Older employees are generally more interested in healthcare benefits and 401(k) matching funds versus younger employees, who emphasize stock options, assistance with student debt and continued education.

Bridging the Generational Gap

Every person is different, and many employees defy generalizations. Hopefully, employees of all generations share the common goals of achievement and organizational success. To meet these goals, employers should use a variety of communication methods and seek employee input. A flexible range of benefits will appeal to the needs of a diverse workforce.

Look for opportunities to pair workers from different generations on teams and in mentor-mentee relationships so they can learn from each other. By understanding employees’ varying viewpoints, employers can sustain a harmonious work environment that transcends generations. ■

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