ENTERLOGUTOR



FALL 2016

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News from the DFW Hospital Council

DALLAS-FORT WORTH HOSPITAL COUNCIL

GROWINGLITTLE MINDS

FOX News reporter Lauren Przybyl (I to r), W. Stephen Love and Mayor Mike Rawlings during a live interview September 8.

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Growing Little Minds campaign officially launched in September

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Steve Love
President/CEO
Dallas-Fort Worth
Hospital Council

We must all work together

MARGARET CHASE SMITH ONCE SAID, "Public service must be more than doing a job efficiently and honestly. It must be a complete dedication to the people and to the nation."

The 85th Texas Legislative Session begins Jan. 10, 2017. We thank our state leaders for their public service and their dedication to Texas. The long hours and conscientious efforts through the legislative process underscores their commitment.

This legislative session will be challenging because the budget will be front and center. The decrease of oil prices, reduction of sales tax and budget priorities will certainly impact the atmosphere in Austin. We are in this together and working collaboratively will produce meaningful results for all stakeholders. Our main priorities will be:

- Supporting the long-term extension of our Medicaid 1115 Transformation Waiver;
- Striving for comprehensive health insurance coverage;
- · Preserving trauma care funding to mitigate uncompensated emergency care, and;
- Supporting expansion of telemedicine and virtual health initiatives.

We must all work together on reducing physician, nursing and allied health workforce shortages. We can achieve this through enhanced funding for educational programs directed towards faculty salaries, student scholarships and financial aid focusing on prevention and wellness.

Hopefully, the federal public policy will include meaningful refinement of the Affordable Care Act (ACA). We must now wait and see as **President-Elect Donald Trump** has stated he wants to repeal the ACA. We always work in a bipartisan manner when advocating our priorities, so we hope to work collaboratively in protecting patient access to quality care. We might just agree more than we think.

The 85th Texas Legislative Session will be difficult, but if everyone works together, our collective impact will benefit the health of all Texans. It's the right thing to do as we strive for better health, better care and better value.

As I write this column, we just heard about the passing of a good friend and colleague at the Texas Hospital Association, **Mr. John Berta**. John worked diligently for all Texas hospitals for many years and his warm smile, skill of explaining complicated finances and impeccable integrity will be greatly missed.

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Thank you for your support of the DFW Hospital Council.

FALL 2016

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EINTERLOCUTOR

EDITORIAL

Executive Editor **W. Stephen Love**Managing Editor **Chris Wilson**Photography **Jerry McClure**

CONTACT Chris Wilson chrisw@dfwhc.org



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SEND TO Chris Wilson chrisw@dfwhc.org

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INTERLOCUTOR

I: one who takes part in dialogue or conversation

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



infantbrain development

DFWHC and City of Dallas launch new program



HOSPITALS OF THE DFW HOSPITAL COUNCIL (DFWHC) IN PARTNERSHIP WITH THE CITY OF

DALLAS officially launched an initiative September 8 with a press conference at Parkland Health & Hospital System. The program was inspired by Dallas Mayor Mike Rawlings to encourage new parents to promote their child's infant brain development. Titled "**Growing Little Minds**," the free program highlights simple steps to be taken during a child's first 12 months of life to promote brain development. Instruction is hosted on the initiative's website, **growinglittleminds.com**, and is also shared through social media and in local hospitals.

"We have an unprecedented opportunity to share information with parents that will impact North Texas for the better," said **Mayor Mike Rawlings**. "These infants' brains are the future of our our region. Let's do everything possible to empower parents to make a difference in their kids' lives."

Through the 90 member hospitals of DFWHC, new parents can be connected to the free online resource. The web site



Patty Miller (previous page) discusses "Growing Little Minds" during the September 8 press conference at Parkland Health & Hospital System; Dr. Fred Cerise (top photo, I to r), W. Stephen Love, Tammie Morgan, her daughter Aaralyn Morgan and Mayor Mike Rawlings; Mayor Rawlings (middle photo) is interviewed by NBC 5 reporter Bianca Castro; Love (bottom photo, right) is interviewed by Brian Glenn on 660 AM's DFW Business Today.

provides recommendations from experts of what activities to do from zero to three months, three to six months, six to nine months, and nine to twelve months.

"For more than 45 years, DFWHC has served to unite North Texas hospital and industry leaders with the goal of advancing quality healthcare in our region," said W. Stephen Love, president/CEO of the DFWHC. "Through programs like this, we have the opportunity to share vital information with thousands of new parents each year."

Research points to the importance of infant brain development during the first 12 months of a child's life as being crucial in their development. In fact, approximately 85 percent of a young infant's brain develops in the first three years of life. Natural interactions between young parents and their newborns have a huge impact on a child's mental and emotional progress. Such development will increase a child's chances for success in school, social activities and professional life.

"Babies truly are like little sponges," said Patty Miller, adviser to the campaign and owner of the Power of Nurturing Care. "We hope to encourage parents of new babies by showing them how easy it is to help their children absorb knowledge through normal, one-on-one interactions. Read to them. Talk to them. It is important to engage their growing minds."

The program was brought to life by Agency Creative, a North Texas advertising agency that specializes in connecting brands to their customers.

Media attending the press conference included NBC 5, CBS Dallas-Fort Worth, FOX 4 News, Univision 23 Dallas, WBAP-AM, 660 AM and D Healthcare Daily.

To date, the "Growing Little Minds" campaign has had a total of 42,568,171 PR/media impressions, reaching 287,837 people with 49,094 social media subscribers.

In addition to Mayor Rawlings, key healthcare leaders attending the press conference in a show of support for the program included: Dr. Fred Cerise, president/CEO, Parkland Health & Hospital System; Cheryl McCarver, senior vice president, Children's Health System; Mark Bateman, senior vice president, Texas Scottish Rite Hospital for Children; Lori **Dalton**, senior vice president, Texas Scottish Rite Hospital for Children; Pam Stoyanoff, chief operating officer, Methodist Health System; Jeff Cellucci, chief operating officer, Kindred Healthcare; and Angie Buckmeier, chief nursing officer, Medical City Children's Hospital. ■









Lauren Silverman (I to r), Eugene Robinson and Tucker Carlson discuss the upcoming presidential elections.

Photos by Jerry McClure

The 68th AWARDS LUNCHEON

October 18, 2016 **Arlington Convention Center**

DFWHC's annual event attracts a full house of 700-plus attendees



Margaret Jordan

Clint Abernathy and Lillie Biggins

THE DFW HOSPITAL COUNCIL'S (DFWHC) 68TH ANNUAL AWARDS

LUNCHEON on October 18 attracted a full house of 700-plus attendees to the Arlington Convention Center. The event, themed "Up for Debate: The Presidential Elections" was highlighted by the appearance of **Tucker Carlson** of FOX News and **Eugene Robinson** of *The Washington* Post discussing the upcoming presidential elections. Lauren Silverman of KERA News moderated the discussion.

Joel Allison, president/CEO of Baylor Scott & White Health who will be stepping down in 2017, was given a standing ovation during his tribute introduced by Steven Newton of Baylor Scott & White Medical Center -Grapevine, Scott Peek of Baylor Scott & White Medical Center - McKinney and Cindy Schamp of Baylor Scott & White Medical Center - Irving.

Additional honorees included Margaret Jordan of Dallas Medical Resource with the Distinguished Health Service Award; Clint Abernathy of Texas Health Harris Methodist Hospital Alliance as Young Healthcare Executive of the Year; and Levi Davis of Methodist Health System with the Kerney Laday, Sr. Trustee of the Year Award. Lillie Biggins, president of Texas Health Harris Methodist Hospital Fort Worth, served as Master of Ceremonies.

The Dallas Street Choir, a singing group made up of the homeless and disadvantaged, performed the National Anthem to open the program. Michael Darrouzet of the Dallas County Medical Society and Brian Swift of the

Annual Awards Luncheon







Levi Davis (top left, l to r) and his wife Loretta Davis pose with his award. Ronald Wensel (top right, l to r) of Hunt Memorial Hospital District, Joel Allison of Baylor Scott & White Health and W. Stephen Love of DFWHC. Clint Abernathy (lower left, l to r) and his wife Stephanie Abernathy. NEXT PAGE: Margaret Jordan (top left) accepting her Distinguished Health Service Award. The Dallas Street Choir (top right) perform the National Anthem; Lauren Silverman (middle left) of KERA News moderated the keynote debate. Steven Newton (middle right, l to r), Scott Peek and Cindy Schamp introduce the Baylor Scott & White Health tribute to Joel Allison. Chris Durovich (lower left, l to r) of Children's Health, Joel Allison of Baylor Scott & White Health , Doug Hawthorne of Texas Health Resources and John Gavras formerly of DFWHC. Tucker Carlson (lower right) of FOX News discusses the upcoming presidential elections.

Tarrant County Medical Society provided the invocation and benediction.

"Every year we are honored to provide an opportunity to applaud these great friends of North Texas healthcare," said **W. Stephen Love**, president/CEO of DFWHC. "These recipients have played a crucial role in contributing to the quality of local healthcare. Their work is worthy of historic acknowledgement and this luncheon is our way to celebrate their careers."

VIP guests included former DFWHC President/CEO John Gavras; Betty Farnsworth, wife of James Farnsworth who was the 1957 DFWHC Chair; Mike Mayes, 1984 DFWHC Chair; John Carver, 1993 DFWHC Chair; Clinton Howard,

a 1993 recipient of the Distinguished Health Service Award; Doug Hawthorne, a 1997 recipient of the Boone Powell, Sr. Award; George Farr, a 2001 recipient of the Boone Powell, Sr. Award; Tarrant County Judge Glenn Whitley; Ruby Blum representing Dallas County Judge Clay Jenkins; Leigh Collins representing Senator Konni Burton; Matt Garcia representing Congressman Pete Sessions; Ted Shaw, President/CEO of the Texas Hospital Association; and Tucker Bonner of the American Hospital Association.

Hall Render served as the event's Platinum Sponsor.

Additional sponsors included Ray and Nancy Ann Hunt,

CampbellWilson and Denitech. ■



Photos by Jerry McClure



Making a Difference in Healthcare

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CONGRATULATIONS MARGARET!!!

All of those who know you well agree that there could not be a more deserving and accomplished recipient of this year's

DFWHC DISTINGUISHED HEALTH SERVICE AWARD.

Your work in healthcare over the years — and your remarkable leadership of Dallas Medical Resource — have resulted in a very significant improvement in the lives of all of those who live in North Texas.

Thank you for your steadfast and compassionate service to our community.

NANCY ANN AND RAY L. HUNT



Congratulations to our 2016 DFW

Hospital Council Award Recipients.

Margaret Jordan, 2016 Distinguished Health Service Award Clint Abernathy, 2016 Young Healthcare Executive of the Year

On behalf of everyone at Texas Health Resources and the communities we serve, thank you for your tireless passion and dedication to excellence in health care.



The 68th ANNUAL AWARDS LUNCHEON



THANK YOU SPONSORS!

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Congratulations Margaret Jordan for a lifetime of community service and for your role in founding the National Black Nurses Association.



Methodist Health System congratulates board member, immediate past Board Chairman, Levi Davis on receiving the prestigious Kerney Laday, Sr. Trustee Award.





Around DFWHC



Hinton to become Baylor Scott & White's new CEO

FOLLOWING A NATIONAL SEARCH, THE BAYLOR SCOTT & WHITE HOLDINGS BOARD OF TRUSTEES announced October 10 the appointment of James H. Hinton to president and chief executive officer of Baylor Scott & White Health, effective Jan. 16, 2017. Hinton, a leader with more than two decades of CEO experience, comes to Baylor Scott & White from Presbyterian Healthcare Services, a private, not-for-profit healthcare system in New Mexico and the largest in the state. Hinton will succeed retiring President/CEO Joel Allison, whose leadership steered the organization for 23 years. Hinton has served in his current role at Presbyterian since 1995, and has been with the organization since 1983. Known for helping to build Presbyterian into a model statewide integrated delivery network, Hinton worked to grow the Presbyterian Health Plan, which now serves more than 470,000 lives. Hinton served on the Board of Trustees of the American Hospital Association from 2011 through 2015, and was chair in 2014, Allison will work with Hinton to ensure a seamless transition. ■

Parkland doctor appointed to jail standards commission

ESMAEIL PORSA, MD, EXECUTIVE VICE PRESIDENT AND CHIEF STRATEGY OFFICER AND MEDICAL DIRECTOR FOR JAIL HEALTH at Parkland Health & Hospital System, was appointed to the Texas Commission on Jail Standards on November 1 by Gov. Greg Abbott. The commission establishes standards for the care and treatment of county prisoners. Dr. Porsa is a member and former trustee of the National Commission on Correctional Health Care and member of the Society of General Internal Medicine, Academy of Correctional Medicine. He is a volunteer physician for the Human Rights Initiative. Additionally, he serves as a volunteer clinical assistant professor of family medicine at UT Southwestern Medical Center and as an associate assistant clinical professor at Texas Woman's University. Parkland was named the recipient of the 2013 Excellence in Community Service Award from Texas Hospital Association in recognition of the system's accomplishments in providing healthcare services for the Dallas County Jail. More than 120,000 patients receive healthcare annually through the Dallas County Jail System. ■





Scottish Rite breaks ground in Frisco

TEXAS SCOTTISH RITE HOSPITAL FOR CHILDREN OFFICIALLY BROKE **GROUND** on October 19 for its new 345,000 square foot campus in Frisco. The facility is being built to meet the need of a booming population in North Texas. The ceremony drew a crowd of 250, including Texas Scottish Rite CEO Robert Walker and Frisco Mayor Meher Maso. Scottish Rite, a nonprofit hospital for children that focuses on orthopedics, says about a quarter of its population is from cities north of Dallas. The hospital purchased 40 acres at the corner of Lebanon Road and the Dallas North Tollway in 2014. Walker is a long-time member of the DFW Hospital Council Board of Trustees. ■

GO GREEN!

PARKLAND HEALTH & HOSPITAL SYSTEM AND CHILDREN'S HEALTH have been named two of the 50 Greenest Hospitals in America by Becker's Hospital Review. Hospitals recognized have a variety of programs in place to reduce waste output, energy consumption and water usage. The Becker's editorial team selected hospitals for inclusion based on nominations and research. Since 2013, Parkland has recycled or diverted more than 3,800 tons of waste through 30 different programs. In addition, the laundry water reclamation system saves approximately 12 million gallons per year. About a quarter of Children's Health's electricity use is backed by renewable energy credits, equivalent to removing more than 16 million pounds per year of carbon dioxide from nature. Children's Health is the second-largest healthcare system user of renewable energy in the nation. Children's Health Sustainability Council is in place to identify ways for the system to be more environmentally sustainable. A complete list of the greenest hospitals can be found at: http://bit.ly/2eNrglg. ■





BEST PLACES TO WORK

TEXAS HEALTH PRESBYTERIAN HOSPITAL ROCKWALL AND TEXAS HEALTH PRESBYTERIAN HOSPITAL FLOWER

MOUND were selected by Modern Healthcare as two of the 100 Best Places to Work in Healthcare for 2016. Now in its ninth year, the Best Places to Work in Healthcare program identifies and recognizes outstanding employers in the healthcare industry. The assessment process, which includes an extensive employee survey gathering direct input, also evaluates organization benefits, work/life balance, sustainability, green initiatives and more. Modern Healthcare partners with Best Companies Group on the assessment process. Texas Health Rockwall and Texas Health Flower Mound were honored at the 2016 awards dinner on October 6 in New Orleans. The full list can be found here: http://www. modernhealthcare.com/community/best-places/2016/.

Baylor makes history

Baylor University Medical Center (BUMC) announced October 5 that the hospital performed the first four living-donor uterine transplants in U.S. history, although three of the organs later had to be removed. All of the women who underwent the transplant were born without a uterus. BUMC performed the surgeries in September. The procedures took about 10 hours per patient and included a care team comprised of multiple surgeons from BUMC, Swedish surgeons from the University of Gothenburg and a team of OR nurses and anesthesiologists. ■



Around DFWHC



W. Stephen Love (I to r), Dr. Stephanie Woods and Lee Hilling.

Love interviews author Lee Hilling

DFW HOSPITAL COUNCIL (DFWHC) PRESIDENT/CEO W. STEPHEN LOVE was invited to interview nationally known author **Lee Hilling** during the September 24 book launch of his latest work "A Place of Miracles: The Story of a Children's Hospital in Kabul and the People Whose Lives Have Been Changed by It." The event was hosted by the Aga Khan Council of Central United States and took place at Ismaili Jamatkhana in Plano. A performance by the Ismaili Muslin Youth Choir of Dallas opened the luncheon. Also in attendance was **Dr. Stephanie Woods** of **Texas Woman's University** and a board member of the DFWHC Foundation. ■



Maureen Griffin

Hot Topic Meeting!

WHEN IT COMES TO TODAY'S HEALTHCARE FINANCES,

there's nothing like a DFW Hospital Council "Hot Topic" event to dispel confusion. More than 50 attendees turned out September 29 for the complimentary discussion "Every Cent Counts: Healthcare Finance and Reimbursement" at the Las Colinas Country Club. Topics included an S-10 and 340B update and Medicare appeals. Speakers included Manie Campbell of CampbellWilson, LLP and Maureen Griffin of Hall Render. For information on the presentations, please contact Todd Prine at todd. prine@campbellwilson.com or Maureen Griffin at mgriffin@ hallrender.com. ■



DFWHC sponsors "Brave New World"

The DFW Hospital Council's (DFWHC) own President/CEO W. Stephen Love snapped this photo on October 5 of Britt Berrett, director of BS Healthcare Management at UT Dallas Naveen Jindal School of Management. Britt was the moderator during the school's educational event "Healthcare Realignment: The Brave New World." Panelists included Dr. Jeffrey Canose of Texas Health Resources; Dr. Jim Walton of the Genesis Physicians Group; and Dr. Paul Hain of Blue Cross and Blue Shield of Texas. DFWHC served as co-sponsor of the event which attracted more than 100 attendees. ■



Full house turns out for Nov. 3 Speed Networking

A FULL HOUSE FOR 40-PLUS EARLY-BIRD

ATTENDEES braved the rain to turn out for the third Speed Networking event of the year hosted by the DFW Hospital Council (DFWHC) on November 3 at Las Colinas Country Club. A fun opportunity to meet and greet healthcare executives, the event included representatives from Baylor Scott & White Health, LifeCare Hospitals, the Mary Crowley Cancer Research Center, DHG Healthcare LLP, Max Maxwell Law Practice, P.C., Haven Behavioral Hospital, Custom Caregivers, Uniquely Kneaded and Wilson Office Interiors. DFWHC President/CEO W. Stephen Love and DFWHC Foundation President Kristin Jenkins served as hosts. DFWHC plans to host three Speed Networking events in 2017. Details soon to follow. ■



A Servant Leader Focused On Improving Health Care.

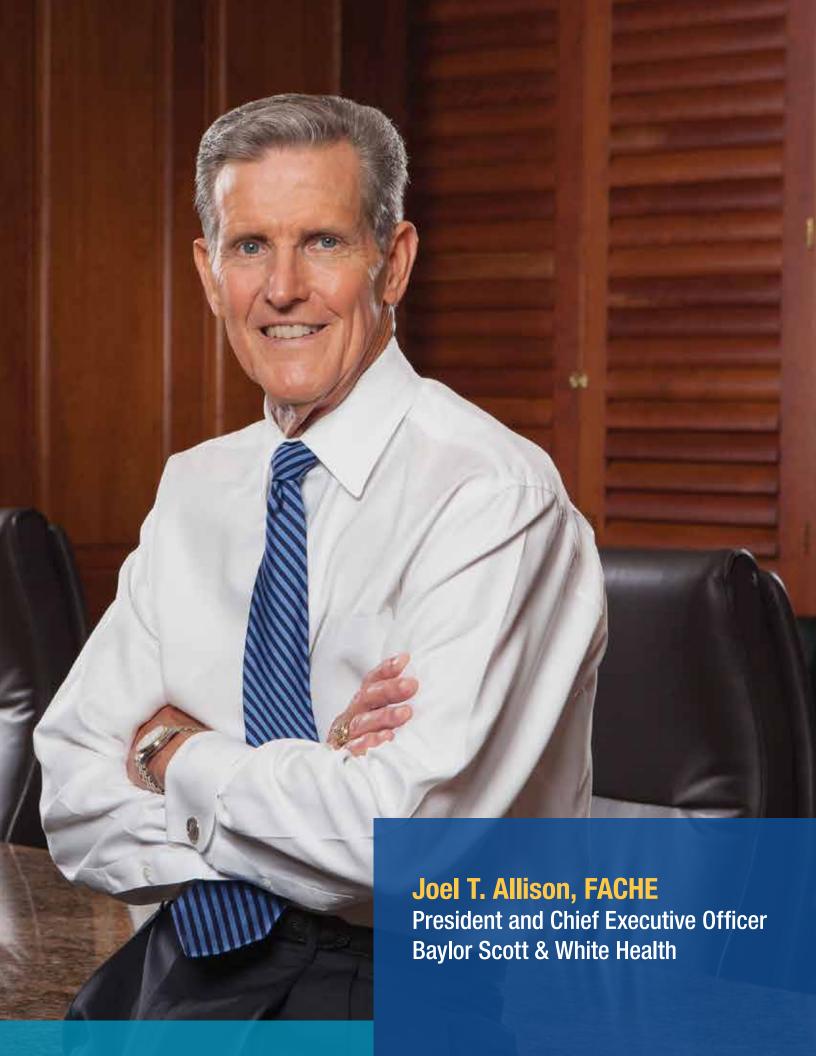
Joel Allison leads Baylor Scott & White Health, the largest not-for-profit health care system in Texas and one of the largest in the U.S.

His core values have guided his life – compassion, servanthood, faith, always putting patients and their families first and encouraging innovation in health care. Joel never loses sight of the Baylor Scott & White Health mission: "to serve all people by providing personalized health and wellness through exemplary care, education and research as a Christian ministry of healing."

Joel has received many honors, including: *Modern Healthcare's* "Most Influential People in Healthcare"; *D Magazine's* 2014 "D CEO of the Year"; Baylor University Alumni Association's "George W. Truett Distinguished Church Service Award"; DFW Hospital Council's "Boone Powell, Sr. Award for Excellence" and Texas Hospital Association's "Earl M. Collier Award" for distinguished hospital administration.

On behalf of the thousands of employees and millions of patients who trust Baylor Scott & White with their health and well-being, we congratulate Joel for all of his accomplishments.







New Recommendations by the American Academy of Pediatrics

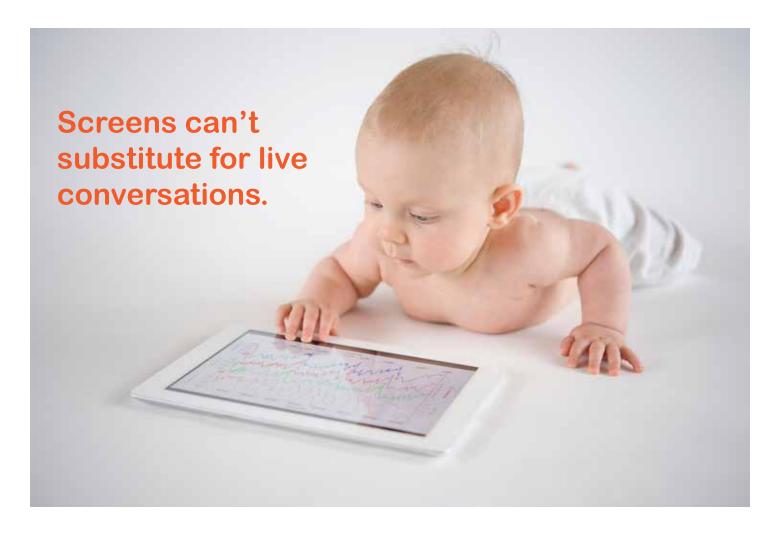
IN OCTOBER, THE AMERICAN ACADEMY OF PEDIATRICS (AAP) ANNOUNCED

two new recommendations surrounding infant and toddler health that may be of great interest to healthcare professionals:

- New research findings haven't completely lifted the "No Screens Under 2" rule which for many years was the standard for how to effectively mitigate the potential negative impact and proliferation of iPads, iPhones and other electronics that are a part of daily life — but there are certainly new learnings. From National Public Radio (NPR): "For babies younger than 18 months, AAP still says no screens at all are the best idea — with one notable exception: live video chat. The AAP doesn't cite evidence that infants actually benefit from this kind of "conversation" the way they clearly do from live social interaction. But there is some observational research that infants as young as 6 months old are emotionally engaged by playing live peekaboo with Grandma on Skype."
- For many years, parents were encouraged to have babies sleep in a different room. As part of the AAP Safe Sleep new guidelines, it is now recommended that "infants sleep in the parents' room, close to the parents' bed, but on a separate surface designed for infants, ideally for the first year of life, but at least for the first 6 months." There is even evidence that sleeping in the same room (but not bed-sharing) decreases the risk of SIDS by as much as 50%, and is more likely to prevent suffocation, strangulation, and entrapment that may occur when the infant is sleeping in the adult bed.

Infants sleep in the parents' room, close to the parents' bed...





What does this mean for babies and social and emotional health? Screens can't substitute for live conversations. This new research shows that bonds can still be created through sight and sound - and most of all - present and engaging interaction, even if it's through a smartphone screen. And while new findings can shift, for SIDS prevention, the basics remain, such as putting babies on their back to sleep, firm surfaces for cribs, among 18 other standard recommendations.

Guidelines come and go with new research and findings, so having a framework is important. Parents and caregivers can be confused by new findings that roll back, or in some cases, completely contradict earlier recommendations. So hearing it from their nurses, doctors and trusted professionals can help them dissect new findings.

At First3Years, we advocate for the importance of building strong relationships between children and caregivers during

these early years. Having other trusted messengers will only help us create better, stronger starts for more infants and toddlers in Texas. First3Years is a statewide organization whose mission is to educate, advocate and collaborate to advance the healthy development of infants and toddlers."A core part of our work includes bringing the latest research to professionals whose work touches the lives of Texas babies and their families," says Sadie Funk, First3Years Executive Director. "Through the years, our community has grown to include social workers, pediatricians, case managers, parent educators and more." To learn more, visit http://www.first3yearstx.org.

SOURCES

http://pediatrics.aappublications.org/content/early/2016/10/20/peds.2016-2938 http://www.npr.org/sections/ed/2016/10/21/498550475/american-academy-ofpediatrics-lifts-no-screens-under-2-rule ■



AS MANY FINANCIAL LEADERS ARE AWARE, the rules for recognizing revenue are changing. In 2014, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) No. 2014-09, "Revenue From Contracts With Customers (Topic 606)."

When the new ASU becomes effective within the next two years, the changes it mandates will affect every healthcare organization in the U.S. that enters into contracts with patients. Healthcare financial leaders need to gain an understanding of the new rules; determine how these rules affect their recognition, measurement, and disclosure of revenue from contracts with customers; and develop plans for adopting the rules as effectively and efficiently as possible.

Seeking answers now to the following questions can lay the groundwork for a more effective transition when the new standard is fully implemented.

I. Do you have an understanding of key terminology under the new standard?

Without a thorough understanding of the ASU's context, an organization will not be able to respond successfully. Terminology in the new guidance includes:

• Transaction price. The new ASU requires an entity to determine the transaction price, which is the amount of consideration to which the provider expects to be entitled in exchange for transferring promised goods or services to a customer. Under the new standard, revenue recognition will be based on transaction price.



- **Performance obligation.** The ASU defines a performance obligation as a promise to transfer to the customer a good or service that is distinct. "Distinct" is determined by whether the customer benefits from the good or service on its own or together with other available resources.
- Variable consideration. This includes all consideration subject to uncertainty for reasons other than customer credit risk. Examples include discounts, rebates, refunds, credits, incentives, performance bonuses and penalties, contingencies and price concessions.
- Implicit price concession. In situations where services are provided to uninsured patients, the transaction price for revenue reporting purposes is likely to be much less than it when contracting with an insured patient. When this is the case, an implicit concession occurs. Often, hospitals providing services to uninsured patients do so knowing they will collect only a portion of the charges. Under the new guidance, the transaction price may be estimated using a portfolio of contracts, based on an average historically collected from that patient class.

2. When does a contract exist?

The ASU requires that all of the following criteria be met in order for it to be determined that a contract exists:

- Parties to contract have approved the contract (in writing, orally, or in accordance with customary business practices) and are committed to performing respective obligations.
- The parties can identify each party's rights with respect to the goods or services to be transferred.
- The parties can identify the payment terms for the goods or services to be transferred.
- The contract has commercial substance (that is, the risk, timing, or amount of the entity's future cash flows is expected to change as a result of the contract).
- It is probable that the entity will collect the consideration to which it will be entitled in exchange for the goods or services that will be transferred to the customer.

If any of these criteria are not met, an entity cannot determine that a contract exists. In addition, until both a valid contract exists and the transaction price can be estimated,

revenue recognition will be deferred.

3. Will systems or processes need to be changed within the organization?

Some healthcare organizations will be able to modify their legacy systems to reflect the new revenue recognition guidance, while others might see the accounting change as a catalyst for implementing systems better able to manage the complexities. An organization may have to adopt new internal controls or modify existing controls to help verify the accuracy of the information being used for the application of the new guidance.

Significant changes in the timing and the amount of revenue recognized could change performance indicators. Financial leaders need to develop a communication plan to educate financial statement users about the anticipated impact of the rules. Affected areas might include debt covenant compliance, sales commissions, bonuses, or other incentive plans. Contracting and pricing practices may need to be reconsidered.

4. Has the organization begun documenting the new judgments required?

Significant judgments may include the following:

- Should constraints be applied to the transaction price when variable consideration is a factor?
- How will stand-alone selling prices be determined when the transaction price must be allocated among performance obligations?
- When is a performance obligation satisfied?

5. Which transition option will the healthcare organization use?

ASU 2014-09 provides two methods to apply the changes resulting from the application of the new rules. The FASB allows public and nonpublic entities to elect either option. One option allows an organization to retrospectively apply the new revenue recognition standard to each prior reporting period presented. The other option allows an entity to adopt the new guidance retrospectively with the cumulative effect recognized in the opening balance of retained earnings at the date of initial application. Comparative periods presented would not have to be restated.

The new standard replaces nearly all existing U.S. generally accepted accounting principles (GAAP) rules related to revenue recognition and disclosure. The far-reaching guidance will affect nearly every U.S. organization. Although the impact will be more limited for some organizations than others, executives at all types of organizations need to consider the effects of the new rules on their particular situations.

Associate Members

LIFESAVEIN.

Apple and Donate Life bring national organ donor registration to iPhone



Interlocutor is publishing articles submitted by Associate Members. This article was provided by **Southwest Transplant Alliance**. For guidelines, contact Chris Wilson at chrisw@dfwhc.org.

APPLE® AND DONATE LIFE AMERICA

ANNOUNCED that, for the first time ever, iPhone® users will be able to sign up to be an organ, eye and tissue donor right from the Health app with the release of iOS 10 in September.

Through a simple, secure sign up process, iPhone users can learn more and take action with just a few taps. All registrations submitted from iPhone are sent directly to the National Donate Life Registry managed by Donate Life America. The ability to quickly and easily become a nationally-registered donor is a complement to donor registration through the Donate Life Texas organ, eye and tissue donor registry. Both registrations can be accessed and will be honored by donation professionals nationwide.

"On average, one person dies every hour in the United States waiting for an organ transplant because the demand for lifesaving transplants far exceeds the available supply of organs," said **David Fleming**, president/CEO of Donate Life America. "By working with Apple to bring the National Donate Life Registry to the Health app on iPhone, we're making it easier for people to find out about organ, eye and tissue donation and quickly register."

"Thanks to the 8-plus million Texans who have already registered just by saying 'yes' to donation while getting a driver's license, we know making registration easy and secure is key," the executive director of Donate Life Texas, Suzy Miller said. "The Health App will soon put the power to create a lifesaving legacy quite literally into the hands of iPhone users everywhere."

Over 120,000 Americans are currently waiting for a lifesaving transplant — and every 10 minutes, a new individual is added to the national transplant waiting list. Each organ donor can save as many as eight lives and heal many more through the gifts of tissue and eye donation. In the absence of donor registration, families are left to make the decision about donation in what is often the worst moment of their lives, the sudden and unexpected loss of a loved one.

"Apple's mission has always been to create products that transform people's lives. With the updated Health app, we're providing education and awareness about organ donation and making it easier than ever to register. It's a simple process that takes just a few seconds and could help save up to eight lives," said Jeff Williams, Apple's chief operating officer. "Together with Donate Life America, we're excited to deliver this new feature to iPhone users in the US with iOS 10."

The Health app on iPhone provides a complete view of your health and fitness data all in one place. The app includes Medical ID, which makes critical health information available in case of emergency to first responders and is accessible



from the iPhone lock screen. Medical ID can display categories like medical conditions, allergies, medications, blood type, and emergency contacts. And with iOS 10, Medical ID offers the ability to register as an organ, eye and tissue donor with Donate Life America.

ABOUT SOUTHWEST TRANSPLANT ALLIANCE

Since 1974, Southwest Transplant Alliance (STA) has been saving lives by recovering donated organs for individuals awaiting a life-saving transplant. STA is among the largest of 58 federally designated, non-profit organ procurement organizations (OPOs) and is now ranked number three in the nation for the highest number of organs transplanted.

STA has facilitated more than 22,000 organs for recovery and enhanced the lives of more than 100,000 people. STA is a member of the United Network of Organ Sharing (UNOS) and is accredited by the Association of Organ Procurement Organizations (AOPO). The organization serves communities in North Texas, Beaumont, Bryan/College Station, Corpus Christi, El Paso, Galveston, Midland/Odessa, Temple, Tyler and Wichita Falls. For more information, go to www.organ.org.

ABOUT DONATE LIFETEXAS

The Donate Life Texas organ, eye and tissue donor registry started in 2006 and now has more than 8.5 million registrants, making it the country's third largest donor registry. The registry is supported by all three Texas organ procurement organizations, LifeGift, Southwest Transplant Alliance and Texas Organ Sharing Alliance as well as the 12 eye and tissue banks serving the state.

Signing up is fast and easy at DonateLifeTexas.org and provides a way for individuals to make their decision to be an organ, eye and tissue donor known. It also provides legal consent for donation after death, which removes the burden of decision-making from the family during an already difficult time and helps ensure no medically-viable organ or tissue is ever lost from a willing donor for lack of consent.

Donate Life Texas is part of the Donate Life America notfor-profit alliance of national organizations and local partners across the United States, serving as a national voice and inspiring all people to save and enhance lives through organ, eye and tissue donation.

Associate Members



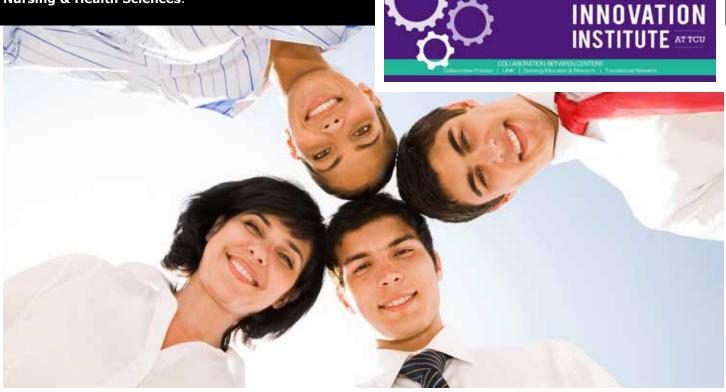


HEALTH INNOVATION INSTITUTE

TCU aims to shape the future of healthcare

Born of an effort to strengthen our centers, providing a more stable structure that will contribute to the advancement of each mission...

Interlocutor is publishing articles submitted by Associate Members. This was provided by TCU Harris College of Nursing & Health Sciences.



TCU'S HARRIS COLLEGE OF NURSING & HEALTH SCIENCES is pleased to announce the formation of the Health Innovation Institute at TCU, a collaborative institute that houses four related centers:

- Center for Translational Research;
- Center for Collaborative Practice:
- Center for Oncology Education & Research;
- Let's Inspire Innovation 'N Kids Center.

"The Health Innovation Institute at TCU will expand and evolve the work of our College's already progressive centers, providing a collective home and uniting them with a shared purpose," said Susan Weeks, dean of Harris College and executive director of the new Institute.

Previously, all centers within Harris College had operated independently of one another. HIIAT will provide an overarching structure and leadership. Under HIIAT, what was formerly known as the TCU Center for Evidence Based Practice and Research: A Collaborating Center of the Joanna Briggs Institute will become two separate centers. The Center for Translational Research, led by Director Dru Riddle, will focus on shortening the gap between the discovery of new knowledge and clinical implementation. The Center for Collaborative Practice, led by Director Linda Humphries, will consult with decision-makers at hospitals and agencies looking to make process improvements and provide leadership of the TCU Evidence Based Practice Fellowship.

Director Suzy Lockwood will continue to lead the

Center for Oncology Education and Research, and TCU is proud to offer the only nursing program in the United States with a designated oncology emphasis track. The goal of TCU's Center for Oncology Education & Research is to provide opportunities for interdisciplinary, collaborative learning and research between university faculty, students and community partners regarding cancer care and survivorship concerns.

HEALTH

The LiiNK Center will house the LiiNK Project under the leadership of Director Debbie Rhea, and will provide research and training to help schools foster social, emotional and physical well-being among children. In schools that have adopted the LiiNK approach, student body mass index is significantly improved, off-task behaviors have decreased, empathy is improving and bullying is decreasing, Students continue to be focused and attentive during the fall and spring semesters while students in the control schools without the LiiNK Project lose focus throughout the year, especially in the afternoons.

According to **Dean Weeks**, Harris College has been home to several centers of excellence—unfortunately, some of the previous centers could not be sustained.

"HIIAT was born of an effort to strengthen our existing centers and cultivate new ones, providing a more stable structure that will better contribute to the advancement of each center's mission," Weeks said.

Together, the four centers of HIIAT are committed to making a meaningful difference through innovation and collaboration.

For more information, visit https://harriscollege.tcu. edu/centers-institutes/hijat/.



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Kristin Jenkins JD, MBA, FACHE President, DFWHC Foundation Senior Vice President, DFWHC

We have recruited a Sepsis Strike Force

SEPSIS HAS BEEN DECLARED A PUBLIC HEALTH SCOURGE by the Centers for Disease Control. Statistics show 80 percent of sepsis cases begin outside of the hospital for 80 percent of the patients diagnosed. Seven in 10 patients with sepsis recently used healthcare services or had chronic diseases requiring frequent medical care. There are four types of infections most often associated with sepsis: lung, urinary tract, skin and gut.

To cure a patient with sepsis, healthcare professionals must act quickly. The DFW Hospital Council Foundation created a collaborative in March to identify best practices in sepsis prevention, identification and treatment. This collaborative will also share this information with our community healthcare organizations.

Named the "Sepsis Strike Force" and led by our own Patti Taylor, Director of Patient Safety and Quality, the collaborative hopes to provide evidence-based clinical guidelines, protocols, guidance and best practices.

The group's membership includes representatives from Cook Children's Health System, Children's Health, Houston Northwest (a Tenet facility), UT Southwestern, JPS Health Network, Texas Health Resources, Baylor Scott & White Health and Methodist Health System. The Children's Hospital Association of Texas has also joined the effort.

The Sepsis Strike Force has struck, and to date it has:

- focused on the differences in flow from different entry points of the hospital;
- identified best practices at local facilities;
- developed flow diagrams for identification and treatment;
- completed a swim lane analysis to identify roles in identification and treatment;
- completed a RACI (Responsible, Accountable, Consulted, Informed) template;
- conducted a two hour CNE event on October 27, "Beating the Odds of Sepsis."

The strike force has a battle plan over the next six months to include hosting a repeat of the sepsis event from October; providing resources to assist EHR systems; providing education for physicians; monitoring outcomes of sepsis mortality; providing public education; and involving first responders in the Sepsis care team

If your organization is not a member of the Sepsis Strike Force - we want you! This initiative is demonstrating high value in patient care and cost effectiveness. For information, contact Patti Taylor at ptaylor@dfwhcfoundation.org. ■

How to contact us 972-717-4279 info@dfwhcfoundation.org



www.dfwhcfoundation.org

Foundation Mission

To serve as a catalyst for continual improvement in community health and healthcare delivery through education, research, communication, collaboration and coordination.

Foundation Vision

Act as a trusted community resource to expand knowledge and develop new insight for the continuous improvement of health and healthcare.

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Around DFWHC Foundation



Foundation chosen for patient safety improvements

THE DFW HOSPITAL COUNCIL (DFWHC) FOUNDATION WAS SLECTED IN OCTOBER as a

subcontractor of the Health Research and Educational Trust. (HRET) of the American Hospital Association, one of 16 hospital associations and health system organizations to continue efforts in reducing preventable hospital-acquired conditions and readmissions. The Hospital Improvement Innovation Network contracts awarded build upon the momentum of the Hospital Engagement Networks and Quality Improvement Organizations to reduce patient harm and readmissions. This announcement is part of a broader effort to transform the national health care system into one that works better for the American people.

"Our mission at the Foundation has always been to assist in the continuous improvement of patient safety and quality," said Kristin Jenkins, president of the DFWHC Foundation. "It's not only a great honor, but a great responsibility to be working with HRET on this initiative."

Through 2019, these Hospital Improvement Innovation Networks will work to achieve a 20 percent decrease in overall patient harm and a 12 percent reduction in 30-day hospital readmissions as a population-based measure from the 2014 baseline. Efforts to address health equity for Medicare beneficiaries will be central to the Hospital Improvement Innovation Networks efforts.

"We have made significant progress in keeping patients safe - an estimated 2.1 million fewer patients harmed, 87,000 lives saved, and nearly \$20 billion in cost-savings from 2010 to 2014 - and we are focused on accelerating improvement

efforts," said Patrick Conway, M.D., CMS acting principal deputy administrator and chief medical officer. "The work of the Hospital Improvement Innovation Networks will allow us to continue to improve health care safety across the nation and reduce readmissions at a national scale."

Organizations receiving contracts include:

- Carolinas Healthcare System;
- Healthcare Association of New York State;
- The Health Research and Educational Trust of the American Hospital Association;
- Health Research and Educational Trust of New Jersey;
- The Hospital and Healthsystem Association of Pennsylvania;
- Iowa Healthcare Collaborative;
- Michigan Hospital Association & Health Foundation;
- Minnesota Hospital Association;
- Ohio Hospital Association;
- Washington State Hospital Association.

The Partnership for Patients model is one of the first models established in 2011 to be tested under the authority of section 1115A of the Social Security Act (the Act) with the goal of reducing expenditures while enhancing quality of care. Since the launch, the vast majority of U.S. hospitals have delivered results of unprecedented national reductions in harm. For more information on the Partnership for Patients and the Hospital Improvement Innovation Networks, please visit: partnershipforpatients.cms.gov.

For information at the DFWHC Foundation, please contact Patti Taylor at ptaylor@dfwhcfoundation.org. ■

Around DFWHC Foundation



Lori Muhr (I to r), Joni Padden, Christopher Philip, Dr. Maeve Sheen, Kristine Powell, Cam Brandt and Patti Taylor.

Beating the Odds of Sepsis

THE DFW HOSPITAL COUNCIL (DFWHC) FOUNDATION'S EDUCATIONAL EVENT "BEATING THE ODDS OF SEPSIS" attracted 100-plus registered attendees on October 27 at the Texas Health Resources' offices in Arlington. Six speakers provided presentations detailing the early recognition of the signs and symptoms of sepsis.

Colloquially known as "blood poisoning," sepsis is a life threatening medical condition that arises when the body's attempt to fight an infection results in the immune system damaging tissues and organs. The U.S. Center for Disease Control's National Center for Health Statistics estimates that the number of times people were in the hospital with sepsis increased from 621,000 in 2000 to 1,141,000 in 2008.

Presenters included **Kristine Powell**, director of emergency services at Baylor Scott & White Health; **Joni Padden**, nursing informatics specialist at Texas Health Resources; **Dr. Maeve Sheehan**, pediatric critical care at Children's Health; **Lori Muhr**, sepsis clinical coordinator at JPS Health Network; **Christopher Philip**, manager of quality and performance measures at UT Southwestern; and **Cam Brandt**, educator emergency services at Cook Children's Health Care System.

The event was videotaped and will be made available on the DFWHC Foundation website. For information, please contact Patti Taylor at ptaylor@dfwhcfoundation.org or 469-648-5023. ■



TQI speaks at national conference

The Foundation's Texas Quality Initiative (TQI) took center stage during the Society of Thoracic Surgeons' "Advances in Quality & Outcomes: A Data Managers Meeting" on September 29 in Baltimore, Maryland.

Cathy Knoff (photo left), the director of TQI, and TQI board member

Syma Prince presented "Wanted Dead or Alive, Not Unknown," detailing the importance of a 30-day follow up of patients. Knoff also presented information on risk factors related to the STS Adult Cardiac Surgery database upgrade. DFWHC Foundation Board Member Dr. Baron Hamman (photo right), a TQI director and surgeon at Texas Health Heart and Vascular Hospital, did a presentation on liver disease and its effect on cardiac surgery. ■

Free online courses now available

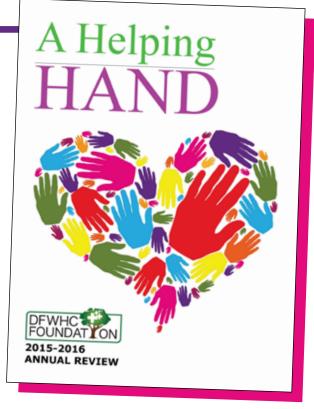
THE DFW HOSPITAL COUNCIL (DFWHC) FOUNDATION INTRODUCED

IN AUGUST the Health Informatics Curriculum and Training for Transformation (HICATT). This free online training course for healthcare professionals is now open for registration. The curriculum is funded by a grant from the Office of National Coordinator for Health Information Technology (ONC). The DFWHC Foundation is a grant partner with the University of Texas Health Science Center at Houston – School of Biomedical Informatics (SBMI) and is offering the training. Employed healthcare professionals are eligible to participate. Students can upgrade their health informatics and gain new skills to advance in their profession. The course offers a choice of four tracks that will take between 12-15 hours to complete. Material includes population health management, value-based care purchasing, patient-centered care, health care data analytics, care coordination and interoperability of

> health IT systems. Training Cohorts run through June 18, 2017. The last registration date is May 1, 2017. To register, please go to https:// sbmi.uth.edu/hicatt/. For questions, contact Sally Williams at swilliams@ dfwhcfoundation.org.

Annual Report 2015-2016

THE DFW HOSPITAL COUNCIL (DFWHC) **FOUNDATION RELEASED ITS 2015-**2016 ANNUAL REPORT to the public in September. This year's edition, themed "A Helping Hand," details each DFWHC Foundation department in addition to research and data projects over the past 12 months. Hard copies were mailed to members September 26. For information, please e-mail info@dfwhcfoundation.org. ■



Around DFWHC Foundation



National Health Literacy Conference

STAFF MEMBERS OF THE DFW HOSPITAL COUNCIL (DFWHC) FOUNDATION made up an entire panel during the 8th Annual Health Literacy Research Conference, October 13 in Bethesda, Maryland. Staff members on the panel included Kristin Jenkins (photo left), president; Patti Taylor (photo middle), director of quality and patient safety services; and Dr. Sushma Sharma (photo right), director of public and population health research. The Health Literacy Annual Research Conference is an interdisciplinary meeting for investigators dedicated to health literacy research. It is an opportunity to advance the field of health literacy and raise the quality of research. The DFWHC Foundation's presentation was entitled as "Using Technology to Increase Health Literacy, Reduce Readmissions and Manage the Health of Populations." Conference attendees included researchers in public health, health services, epidemiology, translational and interventional activities.



Nurse Preceptor Numbers

2016 NURSE PRECEPTOR ACADEMIES hosted 350 attendees from nursing and allied health during five 2016 sessions. The events, held January 21, April 22, June 16, August 30 and October 21, were hosted at locations across Dallas and Fort Worth including Medical City Dallas, UT Southwestern, Texas Woman's University, Parrallon Business Services (HCA) and Texas Health Resources. The Workforce Center has worked with the Texas Nurses Association to secure CNE hours for the sessions and plans to offer the service for future events. ■



Kristin Jenkins (I to r) and Sue Pickens on September 13.

Pickens honored at CHC meeting

IT WAS TIME TO SADLY BID FAREWELL TO SUE PICKENS on September 13 during the DFW Hospital Council (DFWHC) Foundation's Community Health Collaborative meeting in Irving. Pickens, the long-time director of population medicine at Parkland Health & Hospital System for 23 years who announced her retirement in August, was honored in what would be her final meeting with the collaborative. Flowers were presented to her by Kristin Jenkins and Dr. Sushma Sharma of the DFWHC Foundation. Pickens has been a long-time member of the Community Health Collaborative. Coordinated by the DFWHC Foundation, the Community Health Collaborative is made up of 32 residents with expertise in public health, data analysis and strategic planning. The team is working towards understanding health and disease disparities in North Texas while creating plans to promote healthier lives. For information, please contact Dr. Sharma at ssharma@dfwhcfoundation.org. ■



HEALTHY NORTH TEXAS

An annual Dallas client meeting was hosted by the DFW Hospital Council (DFWHC) Foundation on October 27 at the Las Colinas Country Club to detail its Healthy North Texas website. Co-hosted by the Healthy Communities Institute (HCI), the event attracted 50-plus attendees to see the latest updates to the web source of community health and population data. The website. which debuted in 2010, is a tool for community assessment and planning while identifying best practices for improvement. Through the *Healthy* North Texas website at www. healthyntexas.org, stakeholders can prioritize needs and track initiatives. Presenters included HCI President Dr. Dervk Van Brunt and Brad Walsh. strategic planner at Parkland Health & Hospital System. ■



Luncheon date and location announced

The date and location for Foundation Workforce Center's 21st Annual Employee of the Year Luncheon has been set for Friday, April 21, 2017 at the Hurst Conference Center, located at 1601 Campus Drive in Hurst, Texas. A salute to the North Texas hospital workforce, the 2016 Employee of the Year Luncheon honored 14 recipients and 100 nominees. The luncheon is an opportunity for area hospitals to acknowledge exceptional employees. Nomination forms will be distributed in January.



Danny Davila Executive Director GroupOne Services

LinkedIn https://www.linkedin. com/pub/danilio-davilalpi/1/7b9/962

E-mail ddavila@gp1.com

Revisiting education verification

A SIGNIFICANT PORTION OF THE TALENT ASSESSMENT PROCESS is

the alignment of a candidate's knowledge and abilities to the organization's core values and standards. In addition to a candidate's experience, and their appropriate licensure, the verification of education is at least more than 30 percent of a standard background report. Of the four major sources, education continues to be the most difficult to attain, specifically education research has been extended beyond contacting the primary institution.

Candidates have availed themselves to a vast array of options that have increased the complexity of confirming education. At the time the standardization of verifying education was initiated, a degree could be confirmed by contacting the institution by fax or mail. Today, the process has expanded where primary sources are multiplied to include a national clearinghouse of education reporting, governmental institutions and education administration.

The workforce has expanded their sources where education now is procured, and it is difficult for the candidate to provide a reliable source that can provide verification. In this market of "fly by night" training programs, the training provider may be out of business shortly after the candidates complete their training. A candidate can obtain their education certification attainment of a Medical Assistant credential from either a Non-Credit Post-Secondary source such as a private proprietary schools, public workforce programs, community-based organizations, community colleges and in-house employer training programs. Or, it's possible the candidate obtained certification from a credit bearing postsecondary institution.

The question is how to improve the efficiency in obtaining this information on behalf of you, our HR client. This challenge is a complex opportunity that will not be addressed in one comprehensive effort. The solution will be years in the making. The efficiency begins in collecting as much accurate information from the candidate at the time of their application; confirming whether the issuing institution continues to exist.

Solutions will need to come from education sources that provide online portals for students to attain credentials and increased digitalization of records. Until a comprehensive solution is confirmed, education confirmation, specifically from non-traditional sources, will continue to provide a challenge.

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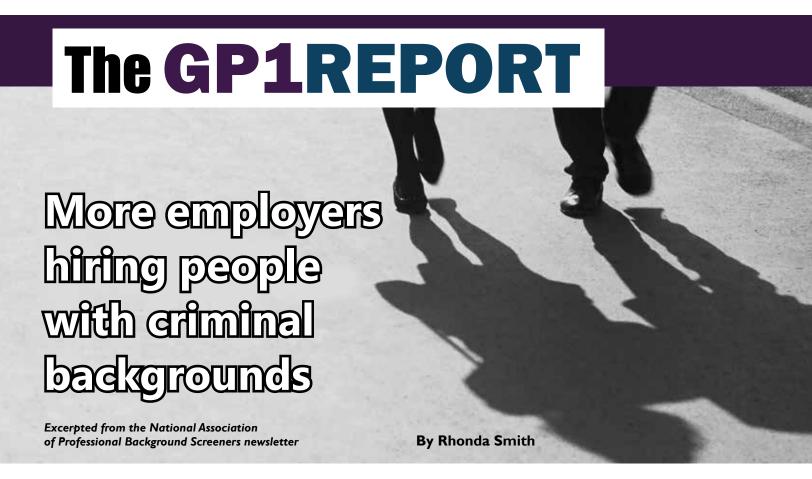


GroupOne's National Account Manager Kim Hines visits with an OHA attendee in November.

GroupOne pays a visit to OHA convention

GROUPONE NATIONAL ACCOUNT MANAGER KIM HINES was working the room during the Oklahoma Hospital Association's (OHA) Annual Convention and Trade Show, November 2-4 at the Cox Convention Center and Renaissance Hotel in Oklahoma City. GroupOne's booth was located on the exclusive "Preferred Partner" row at the event. GroupOne is an OHAendorsed provider of background screening. This year's convention was themed "Joining the Quest for High Reliability," with more than 1,000 attendees turning out for the programs. Topics during the educational sessions included health care high reliability, physician reimbursement, organizational culture, performance improvement and the patient experience. Account Manager Kim Hines is gearing up for more festivities in 2017 with a schedule soon to be announced. If you get an opportunity, drop by to learn the many advantages of GroupOne's services including preemployment and background screening. Or, you can just say "Hello." ■





Businesses are struggling to find qualified workers

ASTHE ECONOMY IMPROVES, IT'S BECOMING MORE DIFFICULT FOR EMPLOYERS to recruit and hire qualified employees. This is nudging organizations to take another look at job applicants who have been incarcerated.

"It's no longer 2010," Marion Mann, a spokeswoman for the Greenville (S.C.) Chamber of Commerce, told Bloomberg BNA. "Businesses are struggling to find qualified workers, and the non-violent ex-offender population is a potential pool of tens of thousands of ready and willing workers."

Serving time in jail or prison is not the deal-breaker it once was for job-seekers. Bloomberg Law®, an integrated legal research and business intelligence solution, combines trusted news and analysis with cutting-edge technology to provide legal professionals tools to be proactive advisors.

The Obama administration has solidified a plan to help people who are incarcerated, and a growing number of employers are pledging to hire applicants who have criminal backgrounds. But much work remains to be done before employers fully open their doors to this prospective employee population, business leaders and hiring managers told Bloomberg BNA Aug. 15-23.

"All too often, returning citizens face enormous barriers that endure long after they have paid their debts to society—and with over 600,000 individuals released from federal and state prisons every year, societal choices about how we treat

reentering individuals will have far-reaching implications for all of us," the co-chairs of the Obama administration's Federal Interagency Reentry Council said in their latest report, released Aug. 16.

President Barack Obama issued a memorandum in April, formally establishing the Reentry Council. The council, convened in 2011 by then-Attorney General Eric Holder, is made up of representatives from more than 20 federal agencies, including the departments of Justice, Labor, Education, and Housing and Urban Development. Attorney General Loretta E. Lynch and Cecilia Munoz, director of the White House Domestic Policy Council, are co-chairs of the council.

Employer Discomfort Could Lead to Bias

Many employers remain skittish about hiring people convicted of a crime, and this challenge might make employment discrimination based on race and ethnicity more likely, sources said. This is because incarceration rates are disproportionately high for racial and ethnic minorities, the Reentry Council report said. Black and Latino inmates collectively represent 30 percent of the U.S. population but make up more than half of the prison population.

At year end 2014, adult correctional systems supervised an estimated 6.8 million people, according to a revised bulletin the Department of Justice released in January 2016. An estimated

1.56 million were behind bars in state and federal prisons, 744,600 were in local jails and 4.7 million were on probation or parole supervision, the Reentry Council report said.

Women make up about 7 percent of the state and federal prison population. But while there are many more incarcerated men than women, the female incarceration rate has risen at twice the rate for males in the past several decades, the report said.

Push for Change at Federal, Local Levels

Proponents of hiring people who have served time already are advocating for them in many cities, states and local jurisdictions.

"In our experience, we have learned that formerly incarcerated individuals can be tremendous employees," David Rattray, executive vice president of education and workforce development for the Los Angeles Chamber of Commerce, told Bloomberg BNA."We recently lost one of our star employees—who happens to be formerly incarcerated—to another organization, but that experience taught us that they can be incredibly hard-working, industrious individuals who can profoundly impact the work."

This is not always the case.

"On the other hand, we also struggled with one of our formerly incarcerated employees, who did not adjust as well," Rattray said. "There are very real challenges and barriers that many of these individuals face, from housing to mental health issues, that could disrupt their progress as they work to turn their lives around."

Fair Chance Business Pledge

Federal and state government agencies, nonprofit organizations and a growing number of employers have resources to help this prospective employee population, Rattray said. Support from employers could include employee assistance as well as professional development programs.

The Obama administration announced Aug. 16 that 185 employers, representing more than 3 million workers, have signed a "Fair Chance Business Pledge." The pledge, unveiled in April, represents "a call-to-action for all members of the private sector to improve their communities by eliminating barriers for those with a criminal record and creating a pathway for a second chance," the White House said.

Wal-Mart Stores Inc., file hosting service Dropbox Inc. and the University of Pennsylvania are among the latest employers to sign the pledge. Employers who signed it previously include American Airlines, Koch Industries, Microsoft and Xerox.

"At Freedom Partners and Koch Industries, we believe if we can reform the criminal justice system, make it more fair and improve public safety, it would be great for everyone," Mark Holden, senior vice president and general counsel of Koch

Industries, told Bloomberg BNA.

Koch Industries has never discarded a job application submitted by someone who's been incarcerated, Holden said. "We conduct an analysis of the individual," he said, and ask what crime was committed, when did it occur and "what did the person learn from it."

"If you take an approach in which you won't consider someone" who's been incarcerated, he said, "you're really limiting yourself from a talent perspective."

There's a growing bipartisan push to help this population of potential employees, various sources said. Business leaders and politicians on both sides of the aisle have spoken in favor of providing resources for juveniles and adults after they are released from jail or prison, Holden said.

Efforts at Johns Hopkins Medicine

During a discussion in June at the Center for American Progress, Labor Secretary Thomas Perez cited Baltimore-based Johns Hopkins Medicine as a model other employers might learn from when it comes to hiring people who've been incarcerated.

"The one thing we do is not share the background check results with departments or hiring managers unless we feel there's a need to know," Michele Sedney, senior director of central recruitment services for Johns Hopkins Health System, told Bloomberg BNA. "We don't want anyone to have preconceived notions about the individuals."

The \$7.7 billion integrated global health enterprise employed 25,135 workers as of July 1. Johns Hopkins Hospital, its Baltimore-based flagship facility, employed 9,894 workers. Between 5 percent and 10 percent of employees at the hospital have been incarcerated at some point, Sedney said.

Johns Hopkins hired a former Baltimore police officer four years ago as an investigator in the health system's human resources division. Background checks are conducted by a vendor not affiliated with Johns Hopkins. The HR investigator is notified when a background check reveals a job applicant has had a brush with the law.

Questions HR representatives pose to the investigator before a hiring decision is made include: How long ago was the conviction? What was it for? Does the crime have some bearing on the job duties? Was the applicant honest about the matter? How old was he when the crime occurred?

"A lot of times they were 18 or 19, and it's now seven to 10 years later," Sedney said. "You're thinking, 'They're older and wiser and more mature now."

Today, between 70 million and 100 million adults have a criminal record on file—approximately one in three U.S. adults, the DOL said.

To contact the reporter on this story: Rhonda Smith in Washington at rsmith@bna.com. ■



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