

Fall/Winter 2024

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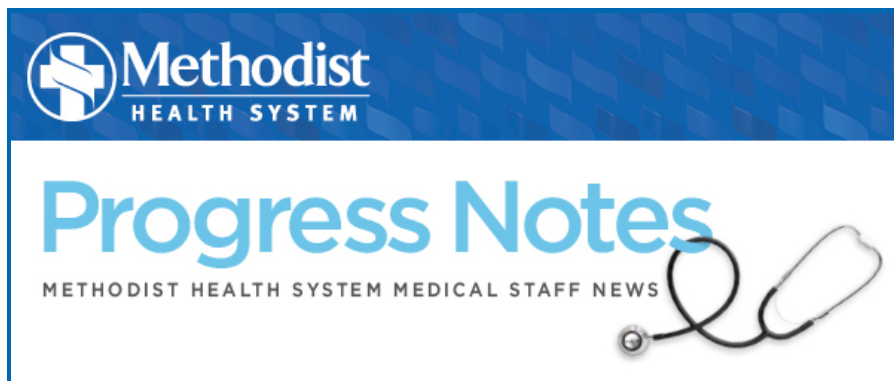
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Survey shows engagement, alignment are up, but opportunities remain



Martin L. Koonsman, MD,
FACS, CPE
Chief Medical Officer

The results are in for the biennial 2024 MHS Provider Engagement survey, and I want to share what we learned from the over 1,000 of you who participated (1,024 total for a participation rate of 51.2%).

Conducted by Press Ganey in August and September of this year, the survey reflects performance in two key areas: **engagement** and **alignment**.

Methodist providers reflected a **higher level of engagement** (top right) than in the 2022 survey, with 76% of providers classified as "engaged" or "highly engaged." This places Methodist at the 61st percentile nationally (+4 ranks from 2022).

Methodist providers also reflected a higher level of alignment (bottom right) than in the 2022 survey, with 75% of providers responding favorably to these questions. This places Methodist at the 70th percentile nationally (+9 ranks from 2022).

Other key indicators include:

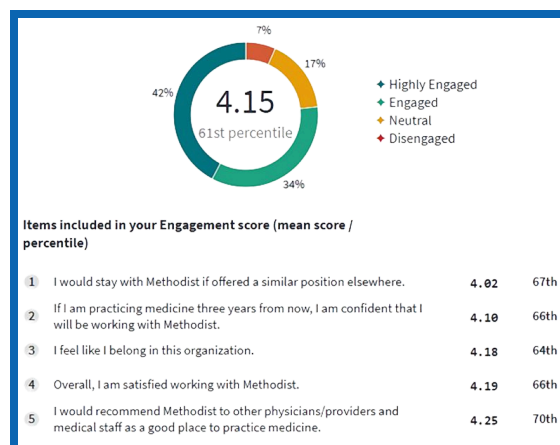
- Our highest performing domain, ranking in the **93rd percentile**, was satisfaction with the ease and efficiency of our electronic medical record
- Job stress in the **82nd percentile**
- Culture of safety in the **74th percentile**

Opportunities for improvement in this year's survey include:

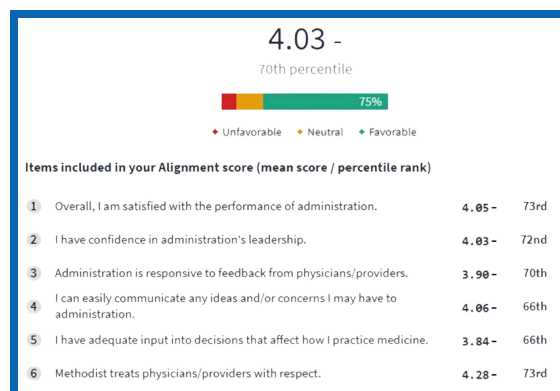
- Feeling feedback is overlooked by administration and wanting to provide more input into how they practice medicine
- Organizational alignment on goals and priorities
- Desire for more recognition

Your voices do matter, and action planning has already begun among senior leadership at each facility to address any challenges the survey identified. Thanks to every Methodist provider who took the time to share this valuable feedback.

Engagement at 61st percentile



Alignment at 70th percentile



Built for Success



Methodist Richardson Project to add new ORs and raise hospital's total bed count to 387

Now that Methodist Richardson has opened two 25-bed units on its newly finished Fifth Floor, the hospital has the green light to staff and equip the remaining 25 beds. This will bring the total bed count at the Bush/Renner campus to 387.

Construction is expected to begin later this year on a \$20.5 million expansion to add three new operating rooms and additional pre-op and PACU beds. Initially, two ORs will be built with a third to be shell space for future growth.

"We identified the necessity for the new ORs based on the growing needs for surgical services in our community," said Methodist Richardson President Ken Hutchenrider, FACHE. "These ORs will support the projected growth of strategic service lines, primarily neurosurgery, trauma and general surgery."

The hospital currently has nine ORs and three cath labs. The Methodist Richardson Foundation will engage the community to raise \$1.3 million of the total funds.

Methodist Midlothian \$20M Fifth Floor expansion meets the growing needs of Ellis County

A \$20 million expansion is now complete at Methodist Midlothian, adding 30 new inpatient beds, Intermediate Care suites, and additional office space, all part of Methodist Health System's long-term strategy to support Ellis County's growing population.

The new Intermediate Care Unit, located on the previously unused Fifth Floor, enhances access to award-winning care, allowing patients to stay close to home for a broad spectrum of medical needs.

"When we opened our hospital in 2020, our promise to this community was to deliver compassionate care close to where residents live, work, and play," said Jary Ganske, president of Methodist Midlothian. "This milestone demonstrates our dedication to this region and our strong partnerships with local providers to ensure seamless patient care."

[READ MORE](#)



Methodist Celina Full imaging suite is taking shape ahead of hospital's debut in 2025

Starting next year, the thriving communities in far north Collin County will have access to a wide range of imaging technology when Methodist Celina opens its doors.

Construction continues this fall at Methodist's newest hospital, with the latest updates including a catheterization lab and the installation of imaging equipment: MRI, CT, a nuc camera, and a tomosynthesis machine, also known as 3D mammography.

Before Methodist came to town, healthcare options and resources have been sparse north of Farm Road 380. That will change as soon as Methodist Celina debuts in the community, building trust and educating patients about all the new capabilities available to them.



Setting the Standard

6 Methodist finalists honored by D CEO

With six finalists among this year's nominees, Methodist is looking to win big at next month's D CEO Excellence in Healthcare Awards.

For the third year in a row, President and Chief Operating Officer **Pam Stoyanoff** is a finalist for outstanding hospital executive.

Methodist Mansfield is in the running for three awards: achievement in community outreach, outstanding volunteer **Mike Koenig**, and outstanding healthcare practitioner **Shaun Garff, DO**.

Methodist Midlothian's partnership with Midlothian ISD was named a finalist for outstanding healthcare collaboration. Finally, Methodist Celina is in the running for outstanding medical real estate project for 2024.

Click [here](#) or on the button to the right to see a full list of the finalists.



[LIST OF FINALISTS](#)



Methodist Mansfield Hospital expands trauma care in pursuit of Level II designation

Methodist Mansfield now has comprehensive capabilities in managing Level 2 trauma cases, reinforcing its commitment to providing exceptional care for patients facing serious injuries. The hospital is now functioning as a Level II Trauma Center in pursuit of designation.

The hospital's trauma center is fully equipped to handle the complexities of traumatic injuries, offering 24/7 access to a multidisciplinary team of skilled professionals. These physicians — trauma and orthopedic surgeons, general surgeons, and trauma specialists — work together seamlessly to ensure that patients receive immediate, high-quality care at every stage of treatment.

"We are proud to offer the full spectrum of trauma care at Methodist Mansfield Medical Center, from initial assessment to lifesaving interventions," said Trauma Medical Director **Thomas Goaley, MD**. "With outstanding facilities and cutting-edge equipment, we can respond rapidly and effectively to all levels of traumatic injury."

The hospital's trauma services include advanced imaging capabilities, fully equipped surgical suites, and a trauma bay designed to manage critical cases efficiently. In addition to trauma care, specialized services such as neurosurgical consultations and critical care are available for patients with complex injuries.

"Our commitment to trauma care is unwavering," Dr. Goaley said. "Whether it's a car accident, a fall, or a more complex injury, we are prepared to respond quickly and with expertise to give our patients the best possible chance for recovery."

Methodist Midlothian Critical-care team earns stripes as Level IV Trauma Center

Methodist Midlothian is proud to announce that it has been officially designated as a Level IV Trauma Center, demonstrating the hospital's commitment to delivering high-quality emergency and trauma care to the residents of Midlothian and its surrounding areas.

As one of the state's designated trauma centers, Methodist Midlothian now plays a critical role in the Texas trauma network, helping ensure that patients receive rapid, expert care when they need it most.

Methodist Midlothian has proved capably of offering advanced trauma life support (ATLS) for seriously injured patients, stabilizing them before transferring to a higher-level trauma center if necessary. This new designation means that the hospital's emergency department is not only equipped with essential resources but also staffed by highly skilled physicians, nurses, and other healthcare professionals who are trained to respond quickly and effectively in trauma situations.

"Achieving Level IV Trauma Center designation is a significant milestone for our hospital and community," said Chief Nursing Officer and VP of Nursing **Brooks Williams, MSN, RN, CENP**. "It reflects the hard work, dedication, and expertise of our trauma and emergency care teams, as well as our commitment to patient safety and quality care. This recognition reinforces our ability to deliver critical, immediate treatment and ensure the best possible outcomes for trauma patients within the community."





Methodist Dallas

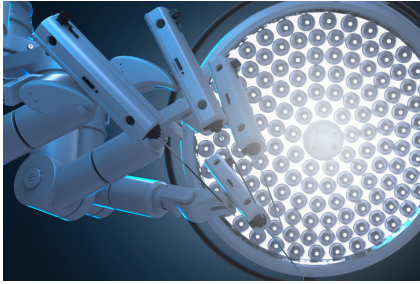
Bariatric team earns re-accreditation for 3-year term

Methodist Dallas will continue to be a Comprehensive Center for Bariatric Surgery.

The Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) is a combined surgery accreditation program composed of The American College of Surgeons (ACS) and the American Society for Metabolic and Bariatric Surgery (ASMBS). The program accredits teams that have undergone independent, voluntary, and rigorous peer evaluations.

Methodist Dallas is once again accredited for a three-year term.

Medical Milestones



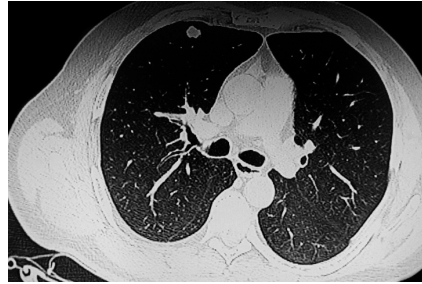
Methodist Southlake

Robotic DIEP flap surgery a 1st for team

The team at Methodist Southlake has conducted its first robotic DIEP flap procedure, a timesaving and muscle-sparing technique that improves outcomes and shortens recovery time compared with traditional approaches.

Breast reconstruction using this deep inferior epigastric perforator (DIEP) flap technique allows for minimally invasive access to the surgeon, smaller incisions, and minimal disruption to the organs.

The approach can also cut the procedure time in half from 12 hours to six hours in this case, allowing for reduced anesthetic and further improving the patient's recovery.



Methodist Dallas

Biopsy performed without surgery

Members of Methodist Dallas' lung nodule program performed a biopsy on a patient using a new minimally invasive method.

The pulmonary team, led by **Jagadeshwar G. Reddy**, MD, pulmonologist on the medical staff, used a robotic-assisted biopsy platform to biopsy lung nodules without surgery. The Ion system uses an ultra-thin catheter down the throat to navigate hard-to-reach nodules. This technology can lead to early cancer diagnosis and treatment.

Ion is made by Intuitive, the maker of the da Vinci Surgical System.



Methodist Southlake

Cath lab staff perform their 500th procedure

The cardiology team at Methodist Southlake recently performed their 500th cardiac catheterization since the cath lab opened in September 2021.

The procedure was performed by **Mihaela Kruger**, MD, interventional cardiologist on the medical staff.

This milestone is a testament to the team's dedication to meeting the cardiology care needs of Southlake and its surrounding communities.

Leading the Way

Leading 2 Excellence SUMMIT a high-flying affair for 470 leaders



The 2024 Leading 2 Excellence SUMMIT was an incredible flight that put the whole team on cloud nine.

More than 470 MHS leaders gathered at the Hurst Conference Center, ready for takeoff on our RISE Journey to Zero Harm. The day-long event was a huge milestone featuring record attendance and showcasing 87 Quality Improvement posters.

The event also recognized our RISE Champions, Silver Fellowship team, and Falls Collaborative, and eight podium presentation teams presented their improvement work in an innovative TED-talk format.

Check out our event keynote presentations, event gallery, and video recap of event day by clicking below!

[SUMMIT RECAP](#)

[VIEW POSTERS](#)

Methodist Dallas

Dr. Olson joins prestigious academy

Congratulations to **Michelle M. Olson, MD, MACM**, for her induction into the American College of Surgeons (ACS) Academy of Master Surgeon Educators.

Dr. Olson, vice president of Graduate Medical Education at Methodist Dallas Medical Center, is among a group of 76 esteemed surgeon educators inducted during a September event in Chicago.

Dr. Olson is a dedicated surgeon educator whose experience in colorectal surgery includes nearly two decades of teaching and mentoring surgical residents and students. She has experience in developing curricula for resident and faculty professional development. She has lectured on various educational topics at the regional and national level.



Dr. Olson with L.D. Britt (left), MD, and Ajit Sachdeva, MD, co-chairs of the Academy's steering committee



Paul Lansdowne, MD
Executive Medical Director
Physician Service
Excellence

Bedside Manners

Recognizing challenges is the 1st step to overcoming them

With the end of fiscal 2024, it's time to reflect on our system's achievements, as well as where the challenges lie, as noted by our latest HCAHPS survey — the Hospital Consumer Assessment of Healthcare Providers and Systems. This is the most public standard by which we're measured, and here I'll share a few more figures, both good and bad.

First the good news: In the overall "rate the hospital" metric, Methodist Health System hospitals achieved Challenge levels in five out of six instances, with Methodist Southlake achieving the top decile and others coming close: 89th percentile for Mansfield and Midlothian, 84th for Dallas, and 81st for Richardson. There were other bright spots worth celebrating, as well:

- At Methodist Charlton and Methodist Southlake, inpatient medicine physician ratings rose more than 10 points each.
- In the emergency departments, physicians on the medical staff at Methodist Southlake were rated at the 95 percentile, reaching the top decile in both 2023 and 2024. Physicians on the ED staff at Methodist Midlothian achieved the 89th percentile overall.

It was a difficult year on the HCAHPS survey for achievement in the "doctor's domain," with four out of six wholly owned hospitals losing ground compared with 2023. It is disappointing when hard work does not translate into the results we all would hope to see.

As always, change is inevitable, and there will be changes in our patient experience survey. In the coming year, the communication with doctors domain will stay the same but there will be some new survey questions, placing a new emphasis on collaborative care and teamwork within the hospital. New questions will include:

- "How often were doctors, nurses and other hospital staff informed and up-to-date about your care?"
- "Did doctors, nurses or other hospital staff work with you and your family or caregiver in making plans for your care after you left the hospital?"
- "How often did doctors, nurses, and other hospital staff work well together to care for you?"

In fact, "how well did staff work together to care for you" has been a key metric for inpatient medicine across all Methodist hospitals, as well as in the ED, and in ambulatory surgery.

Of course, surveys like the HCAHPS work best when physicians also feel heard and remain engaged with the staff and leaders at the facilities where we work. The future poses many challenges, and meeting them will likely depend on how well we as physicians can work and communicate as a team, along with the nurses and hospital staff. Now that we know what we're doing well and where the patient experience can improve, Methodist leaders can help us better focus on improving patient outcomes by implementing collaborative care and enhancing job satisfaction to reduce burnout.

Speaking Up for Safety

Fend off failure with RISE skills

As part of Methodist's journey toward becoming a High Reliability Organization (HRO), our RISE program plays a central role in fostering a culture where patient safety is the highest priority. One of the key principles of RISE is **preoccupation with failure** — a proactive approach to identifying and addressing potential issues before they escalate. This principle is supported by our Universal Skills, which include the practice of **asking clarifying questions**.

Your clinical expertise and daily interactions place you in a prime position to lead by example. Embracing the RISE mindset is not about expecting failure but about being vigilant and recognizing the early signs that something might be off. One simple but impactful way to put this into practice is through asking clarifying questions and encouraging staff to ask clarifying questions



Click HERE to read the RISE newsletter

Why do we ask clarifying questions?

Reduces Risk of Errors: In complex clinical environments, assumptions can easily lead to misunderstandings. Asking clarifying questions ensures we have accurate information, whether it's confirming a medication dose or clarifying patient instructions during a handoff.

Strengthens Team Communication: When you model this behavior, you encourage your team to do the same, promoting an environment where everyone feels comfortable speaking up. This open communication is key to preventing errors and enhancing patient safety.

Fostering a Culture of Inquiry: Your willingness to embrace questions from your team is just as crucial. When a nurse or team member says, "I have a clarifying question," it signals their commitment to the RISE principles and to keeping our patients and staff safe. Your openness to these inquiries demonstrates a shared focus on safety and reinforces that every member of the team plays a vital role in preventing harm.

Universal Skills for Providers

We're asking our providers to join us on our RISE High Reliability journey with training tailored to your needs. To access the video, please click the button below and enter the password **MD-RISE** or visit the **Physician Portal**. You must scan the QR code at the conclusion of the video to receive 1 CME credit for the training.

[WATCH THE VIDEO](#)

How RISE impacts our patients' safety

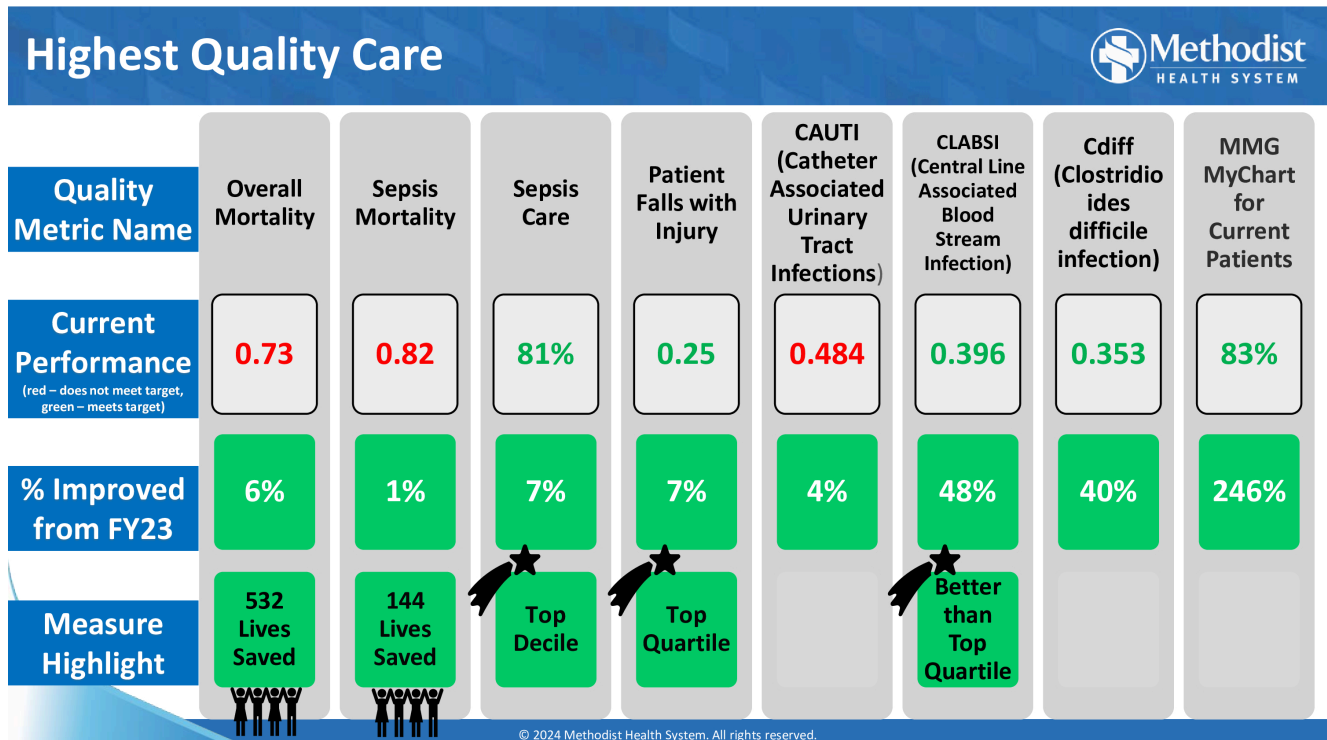
Enhanced Vigilance: By practicing Preoccupation with Failure, you help identify small discrepancies before they become larger problems.

Team Collaboration: Encouraging clarifying questions creates a culture of transparency and continuous improvement, aligning with our goal of Zero Preventable Harm.

Physician Leadership: Your role in modeling and promoting these Universal Skills sets a standard for the entire organization, driving our shared commitment to high reliability.

We invite you to continue leading the way by integrating these RISE practices into your clinical routine. Your engagement and leadership are instrumental in strengthening our culture of safety, making a significant impact on patient outcomes, and helping Methodist achieve its vision of being a high-reliability healthcare organization.

Quality Corner



Epic Updates

New IV fluid dashboard helps cut utilization by 40% amid shortage

Methodist has been navigating a critical shortage of IV fluids for weeks, the result of a long-term disruption in our supply chain.

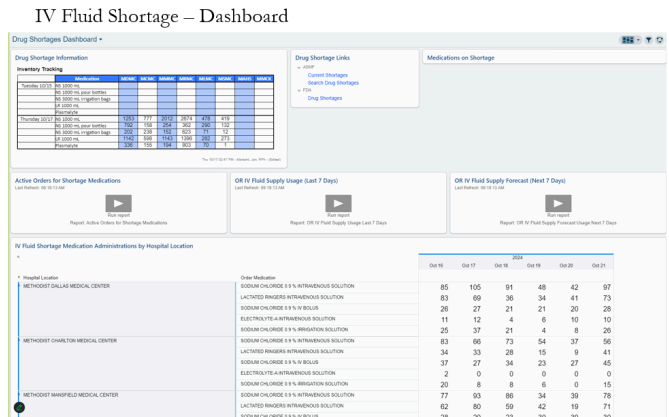
Thanks to newly adopted conservation strategies (outlined in this [Health Alert](#)), and a new Epic dashboard (at right), the system has reduced IV fluid utilization by 40% systemwide and we have a better handle on the challenges ahead at each of our hospitals.

While conservation strategies are making a real difference, Epic also shows conservation rates vary widely across the system.

We need your help to conserve IV fluids so we can avoid taking the next logical step: canceling non-essential surgeries.

Ensuring patient safety should remain our top priority, but we need everyone to keep these strategies in mind and put them into practice whenever possible. We appreciate your vigilance during the ongoing shortage.

If you have questions or concerns, [please email](#) Chief Medical Officer **Martin L. Koonsman, MD, FACS, CPE**.



IV Fluid Shortage – Alternative Alerts

Alternative pop-up

This warning will appear when ordering IV fluids experiencing shortages. Providers can Continue or Remove the order.

Alternative Selection

Alternative Recommended

You selected:
sodium chloride 0.9 % infusion: contin. intravenous infusion, Once, today at 1200, 1 dose

Details:
Hurricane Helene IV Fluid Shortage

Due to the impact of Hurricane Helene, we are experiencing a **critical shortage of IV fluids**. Please consider oral rehydration, continual re-evaluation of the need for IV fluids, or consider alternative treatments whenever possible.

Reason:

Irrigations and Boluses

This warning will appear when ordering irrigations and boluses. Providers can Continue or Remove the order.

Alternative Selection

Alternative Recommended

You selected:
sodium chloride 0.9 % irrigation solution: irrigation, Once, today at 1030, 1 dose

Details:
Hurricane Helene IV Fluid Shortage

Due to the impact of Hurricane Helene, we are experiencing a **critical shortage of irrigations**. Please consider alternative treatments whenever possible.

Reason:

Click [HERE](#) or the banner below to learn about new Epic features



Epic Trainers are here, whenever there's a question — or suggestion

The Epic Training team is always available to answer your questions and provide guidance on how to use Epic more efficiently. We have a trainer posted at each campus to help with anything you may want to know about Epic, including taking your suggestions about how to improve clinical workflows in Epic for all physicians.

MDMC: 214-933-3742 (3-EPIC)
or EpicMDMC@mhd.com

MRMC: 469-204-3742 (4-EPIC)
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MCMC: 214-947-3742 (7-EPIC)
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MMMC: 682-242-3742 (2-EPIC)
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MLMC: 469-846-3742 (6-EPIC)
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MSMC: 682-335-3742 (5-EPIC)
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