



# THE lamp LIGHTER

Methodist Hospitals Nurse Newsletter • Feb. 2026

## MEASURING WHAT MATTERS: Nursing's Impact on QUALITY and SAFETY

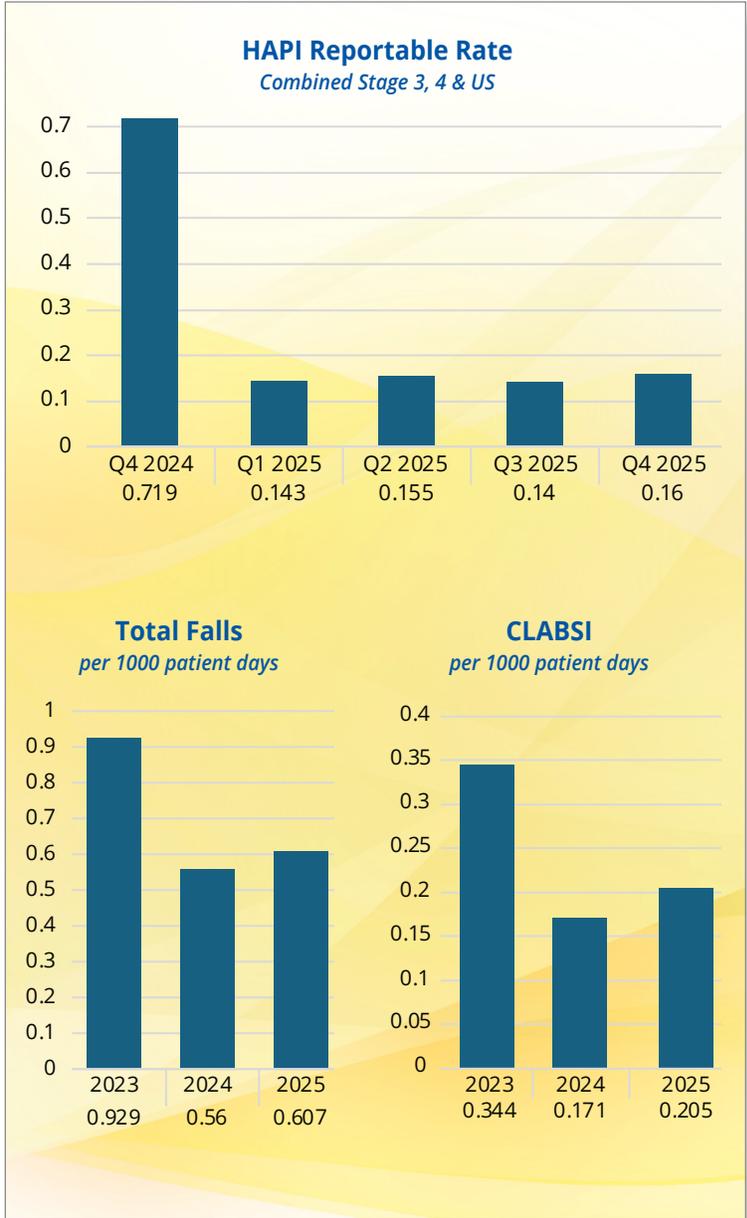
At Methodist Hospitals, nursing excellence is reflected not only in compassionate bedside care, but also in measurable improvements across key quality and safety indicators. The data highlighted in the accompanying charts demonstrates the powerful impact of focused nursing interventions, interdisciplinary collaboration and a shared commitment to continuous improvement.

Hospital-acquired pressure injury (HAPI) rates remained statistically consistent throughout 2025 following an impressive 80% improvement between late 2024 and early 2025. This sustained progress reflects vigilant skin assessments, consistent prevention practices and the daily diligence of bedside nurses.

Falls prevention has also been a major area of focus. While falls increased slightly in 2025 compared to 2024, incidents remain more than 34% lower than in 2023. The Falls Process Improvement Team, along with frontline nursing staff, has emphasized standardized prevention strategies including yellow footies, blankets, and clear visual signage to enhance patient safety.

Central line-associated bloodstream infections (CLABSI) continue to show meaningful improvement. As a reportable outcome under value-based purchasing, CLABSI reduction represents both a quality and financial priority. These improvements reflect nursing excellence in line maintenance, assessment and adherence to evidence-based protocols.

Similarly, hospital-acquired C. diff infections were reduced by more than 50% in 2025 after a spike the previous year. Focused education on appropriate testing, specimen collection and infection prevention practices played a critical role in this success.



**CNO MESSAGE:**

## A Small Practice That Makes a Big Difference



Marla Hoyer-Lareau, RN, BSN, MHA, Senior Vice President, Chief Nursing and Operations Officer

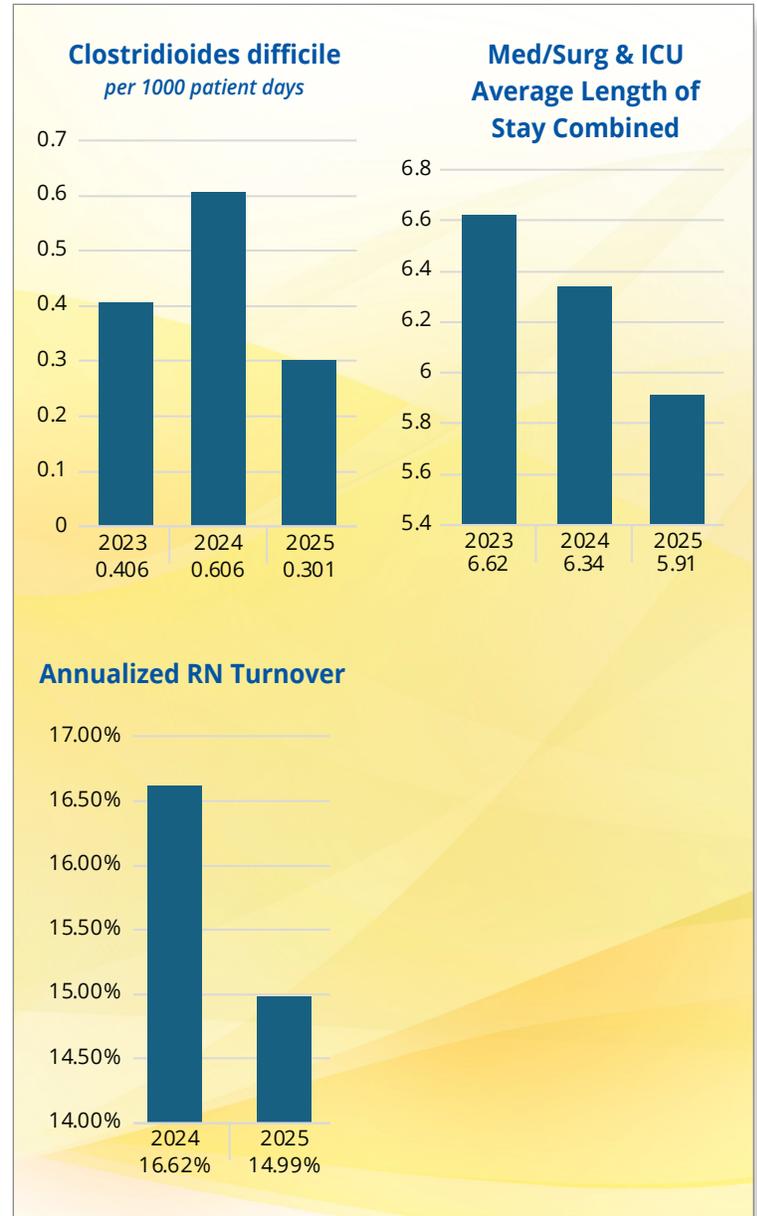
As nurses, we take great pride in the care we provide to our patients. And that commitment extends beyond the bedside to the environments in which we work. One simple but powerful way we can support patient safety, infection prevention and professionalism is by maintaining tidy, organized workspaces.

It's important to keep in mind that our Workstations on Wheels (WOWs) are shared tools that travel from room to room and unit to unit. Taking a moment to wipe them down after use, remove old tape or labels and ensure they are clean and ready for the next caregiver helps reduce the risk of contamination and supports our infection control efforts. Just as important is keeping drinks and personal items off WOWs and patient care surfaces, which protects both our equipment and our patients.

Cluttered work areas can create distractions, slow workflow and increase the risk of errors. By keeping our workspaces clear, organized and free of unnecessary items, we help create a safer, more efficient environment for everyone, including our patients, their families, and our colleagues.

These practices may seem small, but collectively they reflect our shared responsibility and our culture of excellence. Thank you for your continued attention to these details and for the professionalism you demonstrate every day. Your actions truly make a difference.

**Measuring...**Continued from page 1



Improvements in medical-surgical and ICU average length of stay further demonstrate effective coordination among nursing staff, discharge nurses and case management teams, ensuring patients return home safely and efficiently.

Finally, nurse retention remains essential to sustaining these outcomes. By investing in professional development, shared governance and a supportive work environment, Methodist Hospitals continues to strengthen nursing stability, which benefit patients, teams and the entire organization.



# Provision of Care Spotlight: **INFECTION CONTROL**

**As Methodist Hospitals anticipates the upcoming Joint Commission survey, we are publishing a Lamplighter series focusing on various aspects of the provision of care. In this issue, we're spotlighting Infection Control.**

Infection control is a cornerstone of safe, high-quality care and a major focus of the Joint Commission survey process. The Infection Control standards emphasize surveillance, prevention and control of healthcare-associated infections, as well as the organization's responsibility to protect both patients and staff from infectious risks. Every Methodist Hospitals employee plays a vital role in maintaining a clean, safe healing environment.

Nurses are on the front lines of infection prevention, and everyday practices make a meaningful difference.

Hand hygiene remains the single most effective way to prevent the spread of infection. Hands must be washed before entering and after exiting every patient room and anytime they are visibly soiled. Consistent hand hygiene protects patients, coworkers and families alike.

The correct use of personal protective equipment (PPE) is equally essential. Nurses should always wear the appropriate PPE when entering isolation rooms and discard it properly after use to prevent cross-contamination. Maintaining short, clean nails is another important safety measure, as long or artificial nails can harbor bacteria and contribute to the transfer of germs.



Proper handling and cleaning of equipment is a critical component of infection control. Dirty equipment and instruments must be transported in covered, hard-sided containers and sprayed with enzymatic cleaner as required. Shared equipment must be thoroughly disinfected between patients using the appropriate hospital-approved disinfectant. In addition, all clinical equipment should be kept clean, dust-free, and stored correctly to reduce environmental contamination.

Finally, nurses are encouraged to remain vigilant and report any environmental hazards, such as spills, damaged equipment or cleanliness concerns, that could increase infection risk.

By consistently following infection control policies and best practices, Methodist nurses help prevent healthcare-associated infections, protect themselves and their colleagues, and demonstrate the hospital's ongoing commitment to patient safety and Joint Commission readiness.

## 2026 Clinical Ladder Information



Nurses planning to submit a Clinical Ladder portfolio in 2026 are invited to stop by a tabletop review with Mary Jo Valentine, MSN, RN, NEA-BC, Director of Nursing Professional Development. Mary Jo will be available to review the 2026 Clinical Ladder forms, share examples and discuss the different standards required for portfolio submission. Sessions will be held at both campuses:

- **Tuesday, Feb. 17, 11am-1:30pm | Southlake Campus Cafeteria**
- **Wednesday, Feb. 18, 11am-1:30pm | Northlake Campus Cafeteria**

**Drop in at your convenience to ask questions and get a head start on your 2026 submission.**



## PICCs & Central Lines: When Are They Ready for Use?

After placing a PICC or central venous catheter (CVC), the Vascular Access team will notify nursing staff when the line is ready for use. Our current equipment uses a Vascular Positioning System (VPS) to verify tip placement. When properly positioned, the system displays a blue bullseye, confirming the tip is in the lower one-third of the superior vena cava-cavoatrial junction (SVC-CAJ). VPS technology combines intravascular Doppler ultrasound, intravascular ECG, and ultrasound detection to ensure accurate placement. Because every patient is unique, if the blue bullseye cannot be achieved, a confirmatory chest X-ray will be ordered to verify tip location before use.



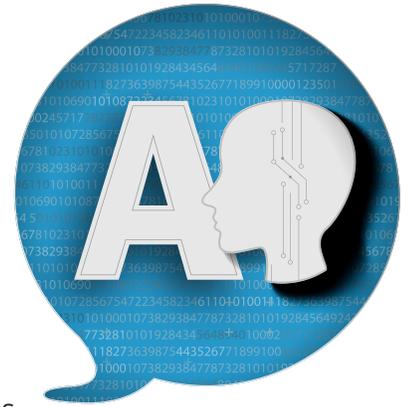
## Be a **VOICE** for **NURSING**

Help shape practice,  
elevate quality, and  
strengthen your  
profession at  
Methodist Hospitals  
through Shared  
Governance.

Scan the QR code to get  
involved and join a  
council today!

### IT UPDATE:

## AI Text Assistance Coming February 16



Beginning February 16, Methodist Hospitals nurses will have access to a new AI text assistance feature within Epic designed to help streamline documentation and enhance efficiency.

This tool allows users to select portions of text within certain notes and prompt a generative artificial intelligence (AI) model to revise or enhance that content. Epic includes predefined prompts to help summarize text, convert lists into paragraphs, or rewrite content for a specific audience. Nurses may also enter custom instructions, such as asking the AI to reorganize information, format content with headers or update patient pronouns.

As with any clinical documentation tool, thoughtful review is essential. AI-generated text may occasionally include inaccuracies, omit important details, or introduce irrelevant content. Nurses should always verify that the information is accurate, complete, and appropriate before accepting it into the medical record.

It's also important to note that AI text assistance may not be available for all notes. Notes containing large amounts of text or protected content, including SmartSections or SmartBlocks, may not support AI summaries. In rare cases, the process may time out due to computing demands. If this occurs, users can simply try again.

This new feature is intended to support nurses without replacing clinical judgment by helping them to time while enhancing documentation quality.

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