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South to West Nurse manager striving for excellence



Lara Teague, RN, (front row, second from left) has made the switch from Integris Southwest Medical Center to Director of Medical Surgery/Intermediate Care at Integris Canadian Valley Hospital.

by Bobby Anderson,
Staff Writer

Three weeks before Lara Teague ever started her new role at Integris Canadian Valley Hospital in Yukon she set out a suggestion box.

The idea was to get feedback and elicit some basic needs before she ever stepped

on the floor as the Director of Medical Surgery/Intermediate Care.

The suggestions came and Teague has gone to work.

"We've been whittling away at those," said Teague, RN. "We were able to answer or rectify all of them but two."

Outside of a popcorn machine and day shift not wanting to pick up dinner trays, Teague found a way to get the nurses what they wanted in nearly every situation.

It's just one of the things she's brought to her new role after transferring from Integris Southwest Medical Center.

"This was a career move but I'm finding that I absolutely love it so it's exciting," Teague said. "I got here and I loved the people and the culture."

At Southwest, Teague was the

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See INTEGRIS Page 3

Crowning jewel St. Anthony Pavilion is set to open

by James Coburn, Staff Writer

St. Anthony Hospital is excited about its new four-story St. Anthony Hospital Pavilion. When it opens in late May or early June of this year, the 110,000-square-foot facility will grace Oklahoma as the hospital's latest expansion on the Oklahoma City hospital's midtown campus.

It consists of a new emergency room to replace the existing ER. There are two new intensive care units and an intermediate care unit.

The Pavillion represents the crowning point of the 2014 plan. In 2003, Saints made the decision to stay in midtown by investing \$220 million to improving and modernizing its campus. The results have been spectacular, adding to the renaissance of downtown Oklahoma City with development and growth.

St. Anthony will have an additional helipad on top of the hospital, said Darla Wilson, RN, director of critical care services.

"One thing very nice about this is you have your emergency room on the very first floor and you have your intermediate care unit," Wilson said. "And then the third floor is both transitional care and ICU and the fourth floor is all ICU."

It is designed to expedite health care with the consumer in mind. She said the new addition will reach out to the community in a patient friendly manner that is designed in a way to meet the flow of patients' needs and that of the nursing staff and physicians.

The nursing staff was instrumental in the design of the complex as well.

"What is really nice is we are increasing bed capacity for the intensive care unit," Wilson said. "We will be at 36 beds (from 32), but we are also adding a 12-bed transitional care unit that will take ICU patients and overflow step down while waiting for placement."

Nurses are excited to prepare for work in a brand new facility, Wilson added. She said they have known more beds were needed for patient care and Saints responded.

Every other room will have a lift for the patients to offer good support for the patients and it also makes work easier for the nursing staff when moving them. Enhancements will also benefit the families of patients.

A floor to ceiling window will help orient patients to know day from night even if they are not directly facing it.

See PAVILION Page 2

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PAVILION

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"It gets that light into the room," Wilson said.

Families will have more places to sit and relax in their loved one's rooms. A longer bench designed for comfort will allow them to recline. All this is possible as the physicians and the nursing staff will be able to reach the patients when needed.

Wilson and her husband moved to Oklahoma City in 1988 and she has been employed at St. Anthony ever since then.

"It has changed so much in this area. And the hospital has changed and it's just beautiful," Wilson said. "I love the staff. They are a wonderful staff who care about their patients. They care that they are giving the best exceptional care. They truly have that desire."

"I think that is what you want from your staff. That is what their heart felt desire is."

Several things about the new ER



make Courtney Myers happy as a registered nurse and, manager of the ER. It will not have two sides of an emergency room as is evident in the current ER.

"Currently we have 15 beds on one side and an additional eight beds. So trying to operate two ERs in conjunction with each other is difficult from a management perspective," Myers said. "So now we will all be under one roof, so that's really nice."

Patients will enjoy a brand new and beautiful lobby. What is especially nice is there will be a private area designated for the mental health population, she said. It will be more therapeutic for the mental health patients to be in during their crisis.

"We looked nationwide at what the premier facilities were doing for mental health patients in ERs and that's how we designed that area for them," she said. The ER is designed to model a fishbowl, she said, for better monitoring of activity. As a result, the nurses are also excited about moving into the new building.

"We've all seen the healthplexes

being built, so the staff is excited to move into a new building as well," said Myers, who has been with Saints for 18 years.

"It's amazing to me because this will be the third ER I have had some involvement with. We always had plans that we would outgrow the ER, so to see us outgrow what we thought we would outgrow is pretty amazing to me."



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INTEGRIS

Continued from Page 1

director for the administrative supervisors, float pool, staffing and patient safety monitors.

At ICVH, she'll have a smaller number of full time employees but more departments.

Soon, Teague will need to utilize the back of her business card as she adds monitor room and administrative supervisors to her purview.

The monitor room falls under Teague in June followed by supervisors in July.

She can handle it.

Teague is an Integris-lifer. She started at Baptist 23 years ago in the ER. She transferred to Southwest Medical after two years.

"It was like walking home when I walked in the doors at Southwest," said Teague, who would spend 21 years on the city's south side before heading to Yukon.

In Yukon, she was warned that things might move at a slower pace than what she was used to at Southwest Medical, which has one of the busiest ED departments in the state.

Her first day on the job the hospital was 100 percent full. The

same happened the next four days.

"It has been a great transition," Teague said. "Of course it's a learning curve every time you move. You've got to learn people but, I don't know, they've got some great bones here. It's been really fun to get to kind of step in and see some great things and see some things you want to make better."

"It was kind of time for me to put my money where my mouth was."

In addition to the new job, Teague is wrapping up her first semester in her master's program with an emphasis on healthcare administration from Oklahoma State University.

She planned on taking the slow and easy route but, like everything else in healthcare, she's going fast forward.

"I was on the six-year plan, with summers off, but that's alright," she says. "I'm on track to graduate December 2017. Of course, now that I've told so many people I can't flunk or drop out."

The vision is simple.

"I want staff to be able to know they have more in them than they think, that they can do more than they think," Teague said. "I want to turn patient satisfaction around. In

a small community hospital there's no reason we should not be in the 95th percentile. We have tremendous support from leadership in staffing.

"Trying to find nurses is a challenge in any area because of the lack of qualified nurses. Med surg is probably one of the hardest to work as far as volume. ICU certainly takes more critical care thinking skills, whereas as a bedside nurse has to think bigger picture on six or seven patients."

Canadian Valley is truly the community's hospital and it has that kind of feel from patients to staff.

Teague knows that's a big responsibility.

"I want to see them shine and be recognized by the numbers for the job they do," Teague said of her staff. "They want to grow and they want to be challenged."

The challenge for administrators like Teague is translating the importance of HCAHPS scores into their daily shifts.

"I'm already working on a plan to move our omniceles out to get people away from the nurses desk and move nurses to each end of the hall," Teague said, going over a list of items she wants to pursue.

If it means it's better for patient

care Teague doesn't expect much push-back.

Teague said she's never seen a group of staff more willing to come in to help out than the one she's inherited.

She saw that first hand when the hospital was at capacity for five days straight and staffing holes started to show.

"Those guys are so awesome. They very easily could just not answer their phone but they don't want to see their co-workers drown so they do," Teague said. "My job is easy compared to that."

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CAREERS IN NURSING

GUIDING LIGHT: HOME HEALTH IS A PRIVILEGE RN SAYS

by James Coburn - Writer/Photographer

Maribeth DeCarlo enjoys working for a company where patients are family and the staff is involved, she said. The nursing staff gives a lot of personal attention to their patients at Innova Home Health, said Decarlo, RN, clinical director of Innova Home Health, located in Oklahoma City.

"I have people call me all the time at night and they're still working," she said. "It's not about hours. It's about the quality of care we can provide for the patients."

Home health is becoming more important with a growing emphasis with all the changes in health care. She said there is a niche of patients who are not ready to enter into long-term care but they can't do some things on their own.

"They need support and assistance and they don't want to move into a facility where someone takes care of them. They want to be independent," DeCarlo said.

Home health gives patients the

ability to maintain their independence at home longer. Health care can be confusing for anybody, DeCarlo said. So she asks how can older people who may already have issues with memory understand maneuvering through the process.

"It's nice that we also get to provide the time," she continued. "I get to sit down in somebody's house and have a conversation with them. You don't have a light ringing. You don't have a phone ringing. You have personal time one-on-one with your patient."

A lot of people envision home health as the way it was decades ago when it had not evolved, she said. Now it is a necessary piece of health care giving help to patients at home who are not ready to enter the realm of other levels of care.

Medicare assists with home health and is a necessary part for those patients who receive it, she said. Some insurance companies are very good

at providing home health services as long as the clinical support is given and communications are effective between the home health company and insurance company, DeCarlo said.

"Some insurances are not very good. Some insurances will give you five or 10 visits at a time. Some of them will give you 10 or 15 visits for the year and that's all you get no matter what," DeCarlo said. "Medicaid used to be 30 visits per year and that may have changed because they just reduced most Medicaid benefits by 25 percent (in Oklahoma)."

She has discovered a valued relationship with her patients and her journey to the world of health care is heartfelt for DeCarlo.

"I've always felt a person needs a purpose," she said.

DeCarlo is a nursing school graduate of OSU/OKC where she earned her degree in 2007. She had previously earned an associate's

degree for substance abuse counseling before switching her bachelor's degree major to nursing with the thought of working in the arena of chemical dependency.

She found there were few detox units in Oklahoma City. This limited her options as she was working weekends for a long time. A friend who worked as a nurse in home health convinced her to become a home health nurse where her hours would be more flexible by working days with her weekends off.

"I went into home health and it was such a refreshing change to be so much more involved with your patients," DeCarlo said. "You have a lot more say-so about what you can provide for a patient. When you work in a hospital, you don't have that leniency."

"I love home health. You get to really see the improvement of your patients' lives more than you do in a hospital."

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As a senior in high school, Heath was an important part of the Oklahoma City Junior Rowing Crew, but in the fall of that year he started feeling sick and didn't know why. His heart rate would go through the roof when he was practicing on the rowing machine, even when he was standing around after practice. His coach and family knew that this wasn't right, so he went to see the doctor. He was diagnosed with Wolff-Parkinson's-White Syndrome.

In March, after many tests and procedures, Heath was put on the heart transplant list at INTEGRIS Baptist. At the end of May he received the call that a heart was available for him. After only two weeks in the hospital, he was able to return home.



Heath is now attending OSU and enjoys biking around campus and attending his classes. He is involved in several Christian Ministries in Stillwater. "I'm getting my life back and I am so grateful to my God and my donor," says Heath.

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Maribeth Decarlo spends a lot of time educating families and caregivers as a registered nurse and the clinical director of Innova Home Health.

She had also spent four years in an Oklahoma City hospital working as a mental health tech while in nursing school. And at the hospital she worked some in a psych unit with her psycho/social background.

This translated well to a career in home health where empathy and understanding lends itself to providing education to patients, she said.

"When you're trying to get somebody to improve their whole lifestyle it is helpful," DeCarlo said. "But the reason I became a nurse is because I like people, it wasn't because I was necessarily interested in the medical side."

DeCarlo's father was a physician who talked about medicine at the dinner table when she was growing up in Oklahoma City. Her brother went to medical school and always joined in the conversations about medicine.

She learned that nursing would provide her a range of options to explore in a career. She interviewed with several companies before choosing Innova Home Health.

"I like the fact that this is a smaller company where patients are

our family," she said. "We get to know them and I know all my staff. It's like a family here. And I like that. I don't want my patients to be a number. They are a person."

Having a job where she actually makes the world a better place is never a hassle. DeCarlo doesn't feel like she's going to work when she wakes up. The effort is seamless and led by compassion.

"I look forward to being here. It's not like when I was younger and I was just making a paycheck," she said. DeCarlo enjoys hearing about her patients hobbies and personal histories.

"I love to cook," she said. "I'm engaged and we're going to be married in October. So I spend time with him. He's a nurse and he works in Elk City so he's here 60 percent of the time. I'm involved in recovery. That's my interest, chemical dependency and substance abuse. So I'm involved in AA."



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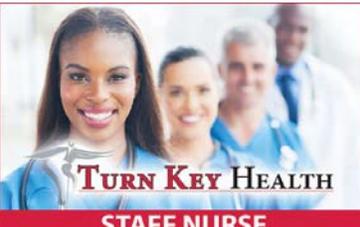
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Springtime allergies: Annoying but largely harmless

Oklahoma City and Tulsa both ranked in the top 20 of the Asthma and Allergy Foundation of America's new 2016 list of "Most Challenging Places to Live with Spring Allergies."

If you've lived in Oklahoma for any length of time, you're familiar with the usual seasonal allergy suspects: pollen, dust and mold. But have you ever wondered why they impact the human body?

While the temptation might be to blame those blooming trees or swirling prairie winds, Oklahoma Medical Research Foundation immunologist Eliza Chakravarty, M.D., says the real culprit is your own immune system.

"Your immune system has developed to protect you from dangerous things like the flu, strep,

viruses and other real invaders," said Chakravarty, a physician and medical researcher. "One of the key functions of the immune system is to recognize what is safe and normal and what is out to cause you harm."

When flu and other viruses enter the body, said Chakravarty, the immune system is right to mount an attack. However, when it comes to allergies, your body is overreacting to mostly harmless substances.

There's nothing sinister about pollen, said Chakravarty, but as far as your immune system is concerned, it might as well be ripped from the pages of a Stephen King novel. "Allergies cause an inappropriate immune response that attacks harmless things you pick up



Oklahoma Medical Research Foundation Scientist Eliza Chakravarty, M.D.

from the environment."

When an allergen enters the body, the immune system attacks it with antibodies, which bind to the allergen. This causes the release of histamines, special compounds in our cells that trigger the allergic response.

"The histamines launch a cascade of symptoms like inflammation, swelling, watery eyes, congestion and sneezing, all those allergic symptoms we look for in spring and fall," Chakravarty said. "Fortunately, these symptoms typically are more aggravating than they are dangerous."

When people take antihistamine medications like Allegra, Claritin or Zyrtec, the drugs don't actually stop the body's reaction to allergens. Instead, they block the action of the histamines that are released.

Aside from antihistamines, another common treatment for allergies comes in the form of decongestants. These medicines open nasal and sinus passages by reducing swelling and allowing drainage to occur. However, these medicines can raise blood pressure, and

Chakravarty recommends consulting your physician before using any decongestant for more than a few days, as they can affect blood pressure and other underlying conditions.

Over-the-counter nasal sprays that contain low doses of steroids can also help relieve inflammation in the nasal passages.

Although there are no cures for allergies, researchers are studying allergies and the immune system to understand why the overreaction occurs and how best to combat it.

In the meantime, those with serious allergies should limit their time outdoors, minimize dust in the home and find an allergy medication that prevents sneezing and congestion without causing excessive drowsiness.

"We want to develop therapies that will tell your immune system to calm down and relax, because it's only pollen or dust," said Chakravarty. "In general, seasonal allergies can make you miserable and can be a real nuisance. But on the bright side, allergies aren't causing real damage and, for most of us, they only last a little while."

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Special to the Nursing Times

Early Warning Signs of Alzheimer's

by Ron Burg

As we age, there are certain things we can expect to change. Our memory isn't as good, we usually take longer to make decisions, and we might need help doing tasks that were once simple. However, when a loved one - whether a parent, grandparent, spouse or sibling - begins to show signs of aging, it's scary.

An even more frightening thought is determining whether he or she may need more medical and living assistance. This could mean moving to a smaller, more manageable household, professional home care services, or even moving in with a relative. You want to provide the best care possible for your loved one, while still respecting their independence and wishes. Your decision will likely be based off the mental and physical condition of your elderly loved one.

But, how do you know your mom's sudden forgetful nature is a normal sign of aging or something worse? When it comes to dementia and Alzheimer's, early detection can provide the best treatment and care.

Here are the early signs of Alzheimer's disease:

- Memory changes

This is often the most obvious and common change associated with Alzheimer's disease. Forgetting the occasional appointment or name is a usual sign of aging, and the elderly person can usually remember them later.

Memory loss that can signify something worse consists of forgetting new information, important dates and events, asking the same thing or needing to hear the same information over and over, and an increased dependency on reminders. If the memory loss disrupts a person's daily life, you should probably head to the doctor.

- Withdrawal from usual activities

A person who suffers from the early stages of Alzheimer's will avoid social activity and may stop all social interaction, hobbies, and sports due to their changes. You may also notice they become passive - watching TV for long hours, sleeping more, or avoiding daily tasks. What is normal, however, is an elderly person sometimes feeling weary of social obligations.

- Problems with writing and speaking

An early indicator is a sudden inability to follow or join a conversation. A person might stop in the middle of a conversation and have no idea how to continue, or repeat himself or herself often. They may also struggle with vocabulary and have trouble finding the right word for an object.

- Disorientation with time and place

While it is typical for a senior citizen to forget what day it is or where they were going, it is not an aging-related sign when a person becomes lost in a familiar area, doesn't know how to get back home, or cannot recall how they got to their current location.

- Changes in mood and personality

Everyone experiences mood swings, but, in the early stages of Alzheimer's, a person will often rapidly switch moods for no apparent reason.

- Trouble understanding visual images and spatial relationships

Some people will experience trouble reading, judging distance, and determining color and contrast. They will likely show signs of having difficulty while driving.

If you are concerned about a loved one or have suspicions they may have Alzheimer's, seek a medical opinion. Remember, you are not alone, and it is best to receive an early diagnosis.

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The Hospice Directory above does not represent a list of all Hospice facilities statewide. For a complete list visit www.ok.gov/health



**Vicki L Mayfield, M.Ed., R.N.,
LMFT Marriage and Family
Therapy Oklahoma City**
*If you would like to send a
question to Vicki, email us at
news@okcnursingtimes.com*

Q. I have struggled with my weight for years and I know I need to break out of my current eating habits. I recently heard something about "mindful eating." Could this help me?

Mindfulness is something that could help all of us. Because our lives are busy we struggle with living in the moment, we believe there is not enough time to slow down and breathe.

Here are some ideas for beginning to practice mindfulness:

1. Start small - 5 minutes
2. Link mindfulness with something enjoyable (morning beverage, beloved pet, favorite person.....something that makes you happy. Do Not think about paying the bills!!
3. Develop a specific time, place. (your favorite chair, the patio)

The idea is to STOP EVERYTHING!!!! For a moment. Yes you can do this!!

Mike was finally willing to practice mindfulness. He said he was always in motion but felt that he sometimes didn't get much accomplished. He agreed to five minutes of sitting in his favorite chair with no TV, lap top, phone, book, etc. He planned to set the timer and sit on his hands.

It is disturbing that lives have become so busy that it is hard to sit perfectly still with nothing to distract us for five minutes.

Now lets connect mindfulness with eating. When you decide to eat, are you hungry? Do you have time to sit down, eat slowly and enjoy your food? Have you noticed that when you are hungry you don't put much thought into the nutrient content of the food?

Millie is a food addict. She has an eating disorder. She loves fast food, especially the drive thru. I challenged Millie the next time she pulled in to one of her many "drug houses." she would not go through the drive-thru immediately but pull over and have 5 minutes of mindfulness before ordering.

Mindful eating is about stopping, breathing and giving thought to the body and what it needs to be healthy. There will always be the moment we grab a donut in the break room because that is just what we want but keeping those moments to a minimum is the mindful part.

Society works against mindfulness. There is a limit to how healthy society wants us to be. There are many "enticements" not to be healthy. (That is another column all by itself)

Mindfulness. Quiet. Peaceful. Breathing. Doing nothing. Being with yourself in the moment.-

Childhood Obesity Goes Beyond Weight Gain Pediatrician Talks Side Effects and Breaking Unhealthy Patterns

Childhood obesity has more than doubled in children and quadrupled in adolescents in the past 30 years, according to the Centers for Disease Control and Prevention. "The risk of adult obesity increases as a child gets older. If an infant is obese, he or she has a 14 percent chance of being obese as an adult. Twenty-five percent of obese preschool children will be obese as adults, and obese adolescents have a 90 percent chance of adulthood obesity," said Amy Gumuliauskas, M.D., St. Anthony Pediatrician.

Childhood obesity goes beyond weight gain, as it increases risk of other medical issues. "Childhood obesity affects all organ systems. Overweight children mature earlier compared to non-obese children. They are almost three times more likely to develop high blood pressure and Type 2 diabetes, and two times more likely to develop high cholesterol, which leads to early heart and kidney disease," said Dr. Gumuliauskas. "Type 2 diabetes has been diagnosed in children as young as nine years of age," she added.

Obstructive sleep apnea, increased severity of asthma, exercise intolerance, increased mechanical stress on joints, dysfunction of the liver, and menstrual irregularities, are other side effects that can affect a child suffering from obesity. So, what can we do to help our children? How can we influence a healthy lifestyle? Dr. Gumuliauskas gives us a few tips on how to do just that.

"Parents can break this pattern by making healthy choices that involve the whole family:

- First, the family needs to sit down for meals together, with all distractions removed. The television should be off, and cell phones and tablets should be put away. Meal time should be a fun time for the family to eat and socialize together.
- Second, the family should not have sugar-containing beverages in the house. Children need 16-24 ounces of low-fat or skim milk per day. Milk should be served at meals and water in between meals when children are thirsty. Juice, soda, sports drinks and energy drinks contain large amounts of sugar and extra calories.
- Third, both adults and children should have half of their plate filled with fruits and/or vegetables at every meal. Fruits and vegetables have vitamins, minerals, and fiber that are essential for healthy growing bodies. If children are still hungry after eating an age-appropriate sized plate of food, parents should offer the child a second helping of fruit and/or vegetables, but not more of the other food groups.
- Fourth, the family should limit screen time - meaning television, video games, computer, tablet and cell phone. Children less than two years of age should not have any screen time, and children two years of age and older should limit screen time to no more than two hours per day.
- Finally, children should participate in at least 60 minutes of moderate to vigorous physical activity every day. On school days, children need 60 minutes of physically activity in addition to whatever they do in school. Physical activity has a positive effect on all aspects of a child's health, including weight reduction, improved self-esteem, and better school performance."

Introducing a healthier lifestyle to our families isn't always easy, but it doesn't mean it can't be fun. "Parents can allow their children to help compose the grocery list, specifically picking out which fruits and vegetables the family will eat for the week. If children are involved in the process, they are more likely to eat them during mealtime," said Dr. Gumuliauskas.

Exercise is another great opportunity for families to do something fun together. "Children love playing with their parents, and will be much more likely to participate if parents are involved. Examples of such activities include taking a walk, riding bikes, kicking a soccer ball, throwing a Frisbee, playing catch, playing basketball, jumping rope, playing hop-scotch, dancing to music, or even playing with a hula hoop," suggested Dr. Gumuliauskas. "However, because bad weather often prevents the family from being able to go outside, have ideas for both indoor and outdoor activities," she added.



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