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Nurses drive quality at Integris



photo by Bobby Anderson

Sarah Ager, RN, BSN (left) and Emily Coppock, BSN, RN drive quality improvement at Integris Southwest Medical Center.

by Bobby Anderson,
Staff Writer

JCAHO site visit.

Those three words can make even the steeliest of nurses begin to perspire.

Pulled aside in the hall for questioning by a surveyor, new nurses begin to confess

everything from forgetting to washing their hands to that time they stole a cookie when their mother wasn't looking.

They can't help it. The stress is too much.

For Sarah Ager, RN, BSN and Emily Coppock, RN, BSN the phrase is simply the end

result of months if not years of preparation.

And every day of every month of every year is spent trying to take the fear out of what in all reality should be the shining example of processes that make Integris Southwest Medical Center shine.

The clinical nurse consultants pour over mounds of data each day, trying to smooth out the peaks and valleys.

Words like intracycle monitoring, core measures, compliance, accreditation and CMS requirements are the vernacular

See INTEGRIS Page 3

Moore Norman springboards students into nursing

by Bobby Anderson, Staff Writer

It's just before a mandatory clinical orientation meeting and Fran Johnson's cell phone rings.

"Yes, you give the extended release first," Johnson reassures whomever had just called searching for some timely advice. "But eventually the patient will not be able to take the extended release P.O."

Calls like these come all the time for Johnson, the training supervisor of the Certified Nursing Assistant program at Moore Norman Technology Center.

And she never seems to mind.

"They still call," Johnson says of former students who keep her on speed dial.

And why wouldn't they?

This November marks five years for Johnson at Moore Norman Technology Center. A former inservice education coordinator for two of the largest nursing home companies in Oklahoma, Johnson taught CNAs in the corporate world how to go into a client's home with confidence.

Now she gives that same confidence to her students who are looking to take the next step in their careers.

"Whether they were going to the nursing home, the hospital or assisted living they want to get into the healthcare field," Johnson said. "I (enjoy) being a mentor, a leader and helping them get onto the right track."

The ongoing healthcare shortage makes programs like Johnson's in high demand.

Many students aged 19 to 21 come right out of high school looking for a way to get into the healthcare industry. On the opposite end of the spectrum Johnson sees those in their 50s and 60s come in looking for a career pivot.

"They still call me for good places to go," said Johnson, who admits that no matter what facility she goes into she usually can find a couple of her students. "I do enjoy working with students. They are my main customers and they are the ones I help train, build up and pour into because they need that little push."



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STUDENTS

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Working in the corporate sector she covered Tulsa, Western Oklahoma, Eastern Oklahoma and everywhere in between. Now she's a staple on Oklahoma City's south side.

Johnson estimates that nearly 20 percent of her students use the CNA program as a springboard for their nursing career.

Many nursing programs give preference points to applicants who have their CNA.

"I believe it's an eye-opener," Johnson said of the program. "When they get in it they will determine if it's for them or they really want to go into computers or auto mechanics or something like that. Most people who come into it usually have the stick-with-it to make it."

Success for Johnson is measured in different terms.

She's a product of the Career Tech system, where she became a nursing assistant in the 1970s.

"From the Career Tech I was pushed to go on to college and pursue the RN," she said. "I wanted to pursue the LPN but my instructor said 'you go straight on into it.' I went straight into that RN program



photo by Bobby Anderson

Nurses like Fran Johnson, RN, (right) help students enter the medical field through Moore Norman Technology Center's Certified Nursing Assistant program.



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after high school."

"I was a product of Career Tech and I know what it did for me. It helped me determine this was what I wanted to do. I had the best instructor."

Johnson would eventually matriculate from nursing school at Langston University.

Today, she has 11 instructors working under her teaching students to become CNAs, CMA, AUA and prep courses.

Nearly 500 students each year pass through the programs.

Many of Johnson's instructors are nurses who have experience with nursing homes. Others come directly from local hospitals.

"They like working with students," Johnson said. "It makes their jobs easy because they enjoy the one-on-ones with students in the lectures and the labs. They all have a passion

for education."

Nearly 12 years ago Moore Norman Technology Center became the first Career Tech flex program in the state allowing students to enter healthcare on their own schedule.

Moore Norman's flex program is both affordable and flexible, allowing students up to 20 weeks to complete coursework on their own schedule. Some students who want to get into the medical field right away can complete their coursework in as little as three weeks, including two days of clinicals at a local long term care facility.

During her nursing career, Johnson worked medical surgical, oncology, mother-baby as well as rehab.

It was in rehab where she found her passion for the elderly, but it was at Moore Norman where she found her passion for helping others find their passion.

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INTEGRIS

Continued from Page 1

spoken inside the first floor office the pair share - desks pushed face to face.

Topics like value-based purchasing also come up.

"Trying to figure out how we can stay out of the red," Coppock says.

The two also keep tabs on falls, codes and restraint use but their major focus is those dreaded surveys.

Ager transferred down from the sixth floor in February to advance her nursing career.

She had spent six of her 15 years as a nurse on that floor as a team manager.

Chart audits and core measures were already in her wheelhouse.

"Some of it I had done but coming into this role you see the big picture," Ager said. "It was like being a new nurse all over again."

Coppock came down from ICU and the two learned together coming into their new roles at the tail end of the last JCAHO visit.

The two admitted they were part of the 99 percent of nurses who think about JCAHO visits one time every other year.

"ICU is a lot of critical thinking and trying to predict what's going to happen to your patient before it actually happens so you're not reactive you're proactive," Coppock said. "Same thing with this. It's kind of the same mindset. The goal for Sarah and I since we came into this role is not to be reactive but to be proactive and to always stay Joint Commission ready."

Before the two stepped into the new role, JCAHO visits were prepped for a month or two in advance. Staff was given a quick crash course on what to expect during huddles and team meetings, waiting and hoping they wouldn't be the one to make a critical mistake under inspection.

"We try to look at things from a new perspective," Ager said. "We try to be out on the floors more and educate the staff."

As a manager previously, Ager would be responsible for handing out the Joint Commission handbook, brushing up on what would be evaluated and communicating that to nurses.

"When we look at it now it seems like the stuff nursing does is basic compared to what really goes on," Ager said. "It's just the simple things you can get cited for."

Keeping the hallways clean, making sure the med room door isn't open - just a couple of the simple things that lead to reprimands for improvement.

An independent, not-for-profit organization, The Joint Commission (JCAHO) accredits and certifies nearly 21,000 health care organizations and programs in the United States. Joint Commission accreditation and certification is recognized nationwide as a symbol of quality that reflects an organization's commitment to meeting certain performance standards.

The Joint Commission is the nation's oldest and largest standards-setting and accrediting body in health care.

To earn and maintain The Joint Commission's Gold Seal of Approval, an organization must undergo an on-site survey by a Joint Commission survey team at least every three years with laboratories undergoing survey every two years.

The nurses see their role as helping take the anxiety out of those dreaded visits.

"That way before Joint Commission comes everybody is not stressed out. This is just another day because we're already doing what we should be doing," Ager said.

Coppock agrees.

"That was always my goal when I came to this role to decrease the anxiety that goes on with Joint Commission," Coppock said. "A lot of people look at Joint Commission as punitive but they're actually here to make sure we're doing our jobs the right way."

And that's the daily focus for both Coppock and Ager, the dynamic duo of quality at Integris Southwest Medical Center.

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CAREERS IN NURSING

A FRIENDLY VOICE - KINDNESS ESSENTIAL FOR NURSES IN LONG-TERM CARE

by James Coburn - Writer/Photographer

Kathy Wray, RN, HCR ManorCare Midwest City decided when she was a CNA that she loved geriatrics and would pursue a career in nursing.

"I was going to be a champion for the elderly," she said.

With 15 years of experience, Wray has dedicated her career to taking care of the elderly. She earned a Bachelor of Science degree at the OU Health Sciences Center in 2003. She has been with HCR ManorCare in Midwest City for nearly a year.

She has leaned toward being a caregiver ever since childhood.

"I've always leaned toward being a caregiver," Wray said. "And I've always loved the elderly. Even as I was growing up I helped the widows in the neighborhood."

Her experience includes being a psychiatric tech, which is a CNA, she said. She said that she learned people have a lot of problems and they need compassion in their lives.

Her experience has helped her today as a nurse.

"We're dealing with their lives. We are in their world so we need to help them," she said of long-term care.

She earned her CNA training in 1995 and began her work in Oklahoma City nursing homes. She knows of the hard work that CNAs provide in hands-on care. They do personal work, she said, in the patients' activities of daily living.

"I just established a reason to help the geriatric society and being a CNA really did give me a purpose in life to where I realized how hard it was for them, and how the elderly need an extra measure of compassion," Wray said.

CNAs are unsung heroes, she said, who help to prevent further health care complications in patients' lives. Her reward today as a nurse is simple. It's the relationships that she has developed with her patients.

"They bless me as much as I bless them -- probably more so," she said.

Patients need a nurse who is consistent, someone who cares about what they eat and how they feel, she said. Nutrition is important because their disease process makes their wound's worse, said Wray, who is currently serving as a wound nurse at HCR ManorCare. Patients need a nurse who cares about the condition of their skin, she continued.

She will make sure that residents are turned and their briefs are changed.

"It's about keeping them clean, dry and intact. It's about keeping them where they're not wearing a wet diaper or their skin is not breaking down," Wray said.

Laboratory blood analysis can determine a disease process that makes a resident's wounds worse. She said it is a full-time process keeping patients safe all hours of the day and night. Patient care at HCR ManorCare does not take a rest.

"We have some patients that are so loving to other residents," she said. "The residents care about us and the residents worry about us. We have several little ladies that want to pray with me. They want to help me, want to hug me. And that's how they bless me."

"They are as compassionate about us as we are about them."

She shares many of the interests that the ladies have. Wray likes the art of crafting. Some of the women

spend their time knitting or doing embroidery. Some of them read as Wray does.

"The craft side has two avenues. It helps you feel good about yourself and it helps you to relax. You're working with your hands and it's letting you unwind."

Wray said what she admires about the nursing staff at HCR ManorCare in Midwest City is that they advocate and do their best for each resident who makes the center their home. Communicating with residents is very important and the nurses are polite by answering their questions in the right manner, Wray explained.

"They are very attentive to their needs," she said. "If somebody comes up here and they're wandering and they don't know where to go, my staff always takes the time to reach out to help them."

The residents are not bothersome to Wray because with them is where she wants to be.

"The staff here takes the time and takes the extra initiative to help each one with their little problems," Wray mentioned.

She would encourage anyone graduating from nursing school to consider a career in long-term care. She would advise them to be kind.

"There are so many areas that you can go to, but this long-term care geriatric population needs so many people who are willing to go the extra mile for them," Wray said. "It is very rewarding and there is a big need."

Continued on next page


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Kathy Wray likes the outdoors and sharing stories as a registered nurse helping residents with wound care at HCR ManorCare Midwest City.

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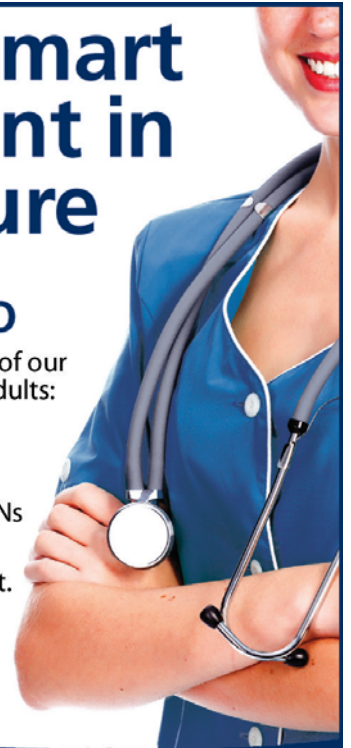
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OMRF lupus researcher receives high honor



Oklahoma Medical Research Foundation scientist Joan Merrill, M.D.

Joan Merrill never made choices in life that seemed likely to lead to a major award.

She didn't start medical school until she was 30. She aspired to pursue research that wasn't encouraged in academic medical centers on the East Coast. She didn't follow what would be considered a "traditional" path for her career. But perhaps her out-of-the-box thinking and unorthodox approach to clinical research is exactly what put her in position for a significant accolade after all.

The Pharmaceutical Research and Manufacturers of America (PhRMA) has selected the Oklahoma Medical Research Foundation physician-researcher as recipient of the 2016 Research & Hope Award for "Excellence in Academic/Government Research."

Tuesday's awards program in Washington, D.C., honored Merrill for her career-long dedication to and important work in the discovery and development of autoimmune disease treatments that have benefitted public health and helped advance patient access to treatments.

"I have been lucky to find work that badly needed to be done, figuring out why so many promising medicines being tested for lupus were failing. I also received much wisdom and support from any number of people who share the same mission," said Merrill.

Merrill came to OMRF from New York in 2001 to pursue her goal of setting up a clinical trial laboratory to work on ways to successfully test drugs for lupus.

"To me, this award means you don't need to have any regrets when you choose an unconventional career," she said. "Who knows? Sooner or later you might get an award anyway."

Lupus, a chronic, disabling disease, has proven challenging to understand, said Merrill, resulting in more than \$1 billion lost in failed trials in just the past few years. Only one treatment has been approved for the disease in the past 60 years. But she never let the challenge deter her, only push her forward.

Since joining the foundation's scientific staff in 2001, Merrill has built a research cohort of more than 500 lupus patient volunteers at OMRF, led numerous clinical trials for investigational lupus treatments, and pioneered novel trial designs for testing innovative therapies for autoimmune disease.

"The staff that joined this team over the years have been the most competent, creative, and dedicated group you could imagine," she said. "Colleagues at OMRF, especially Dr. Judith James, have been endlessly generous, providing a scientific

See LUPUS page 9

Oklahoma's Nursing Times Hospice Directory

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Alpha Hospice: 7512 N Broadway Ext., suite 312
Okc, 405-463-5695 Keith Ruminer/volunteer
coordinator/chaplain

Autumn Bridge Hospice: 405-440-2440

Autumn Light Hospice: 580-252-1266

Carter Healthcare & Hospice: OKC - OKC
Pat McGowen, Vol. Coordinator, 405-947-7705, ext.
134; Tulsa - Samantha Estes, Vol. Coordinator,
918-425-4000

Centennial Hospice: Becky Johnson,
Bereavement Coordinator 405-562-1211

Choice Home Health & Hospice:
405-879-3470

Comforting Hands Hospice: Bartlesville:
918-331-0003

Companion Hospice:
Steve Hickey, Vol. Coordinator, Guthrie:
405-282-3980; Edmond: 405-341-9751

Compassionate Care Hospice: Amy Legare,
Bereavement/Vol. Coordinator, 405-948-4357

Cornerstone Hospice: Vicky Herrington, Vol.
Coordinator, 918-641-5192

Crossroads Hospice: Elizabeth Horn, Vol.
Coordinator, 405-632-9631

Cross Timbers Hospice: Ardmore-
800-498-0655 Davis-580-369-5335 Volunteer
Coordinator-Shelly Murray

Excell Hospice: Toni K. Cameron, Vol.
Coordinator 405-631-0521

Faith Hospice of OKC: Charlene Kilgore, Vol.
Coordinator, 405-840-8915

Frontier Hospice: Kelly Morris, Vol.
Coordinator, 405-789-2913

Golden Age Hospice: 405-735-5121

Good Shepherd Hospice: 4350 Will Rogers
Parkway Suite 400 OKC OK 73108 405-943-0903

Grace Hospice Foundation: Sharon Doty, Dir
of Spec. Projects - Tulsa 918-744-7223

Harbor Light Hospice: Randy Pratt, Vol.
Coordinator, 1009 N Meridian, Oklahoma City, OK
73107 405-949-1200

Horizon Hospice: LaDonna Rhodes, Vol.
Coordinator, 918-473-0505

Heartland Hospice: Shawnee: Vol. Coord. Karen
Cleveland, 405-214-6442; OKC: Vol. Coord. Tricia
Woodward, 405-579-8565

Heavenly Hospice: Julie Myers, Coordinator
405-701-2536

Hope Hospice: Bartlesville: 918-333-7700,
Claremore: 918-343-0777 Owasso: 918-272-3060

Hospice by Loving Care: Connie McDivitt,
Vol. Coordinator, 405-872-1515

Hospice of Green Country: Tulsa:
918-747-2273, Claremore: 918-342-1222, Sapulpa:
918-224-7403

**INTEGRIS Hospice, Inc. & the INTEGRIS
Hospice House:** Ruth Ann Frick, Vol.
Coordinator, 405-848-8884

Hospice of Owasso, Inc.: Todd A. Robertson,
Dir. of Marketing, 877-274-0333

Humanity Hospice:
Kay Cole, Vol. Coordinator 405-418-2530

InFinity Care of Tulsa: Spencer Brazeal, Vol.
Director, 918-392-0800

Indian Territory Home Health & Hospice:
1-866-279-3975

Interim Healthcare Hospice: 405-848-3555

Image HealthCare : 6116 S. Memorial Tulsa,
Ok. 74133 (918) 622-4799

LifeChoice Hospice: Christy Coppenbarger,
RN, Executive Director. 405-842-0171

LifeSpring In-Home Care Network: Terry
Boston, Volunteer and Bereavement Coordinator
405-801-3768

LifeLine Hospice: April Moon, RN Clinical
Coordinator 405-222-2051

Mercy Hospice: Sandy Schuler, Vol.
Coordinator, 405-486-8600

Mission Hospice L.L.C.: 2525 NW Expressway,
Ste. 312 OKC, OK 73112 405-848-3779

Oklahoma Hospice Care: 405-418-2659
Jennifer Forrester, Community Relations Director

One Health Home Health in Tulsa:
918-412-7200

Palliative Hospice: Janet Lowder, Seminole, &
Sabrina Johnson, Durant, 800-648-1655

Physician's Choice Hospice: Tim Clausing,
Vol. Coordinator 405-936-9433

Professional Home Hospice: Sallisaw:
877-418-1815; Muskogee: 866-683-9400; Poteau:
888-647-1378

PromiseCare Hospice: Angela Shelton, LPN -
Hospice Coordinator, Lawton: (580) 248-1405

Quality Life Hospice: 405 486-1357

RoseRock Healthcare: Audrey McCraw,
Admin. 918-236-4866

Ross Health Care: Glenn LeBlanc, Norman,
Chickasha; April Burrows, Enid; Vol. Coordinators,
580-213-3333

Russell Murray Hospice: Tambi Urias,
Vol. Coordinator, 405-262-3088; Kingfisher
405-375-5015; Weatherford-580-774-2661

Seasons Hospice: Carolyn Miller, Vol. /
Bereavement Coordinator, 918-745-0222

Sequoyah Memorial Hospice:
Vernon Stone, D. Min. Chaplin, Vol. Coordinator,
918-774-1171

Sooner Hospice, LLC:
Matt Ottis, Vol. Coordinator, 405-608-0555

LUPUS

Continued from Page 8

backbone for our projects. And this has come from the top down: First Dr. J. Donald Capra, and later Dr. Stephen Prescott. So they, on behalf of this unique institution, deserve this award."

Throughout her career, Merrill has served as the Medical Director for the Lupus Foundation of America and the head of the Clinical

Pharmacology Research Program at OMRF, among many other positions.

PhRMA, headquartered in Washington, D.C., was formed in 1958 to represent the country's biopharmaceutical research companies. The goal is strive for balance between public policy and research to best meet the needs of patients. It now has 12 locations in the U.S. and two overseas.

State Emergency Medical Service Adopts New Rules

The Oklahoma State Department of Health (OSDH) recently updated the rules for emergency medical service (EMS) personnel and agencies. The rules went into effect Sept. 11 and will help ensure Oklahomans receive quality time-sensitive care from OSDH-licensed personnel and agencies.

OSDH updated the license standards for emergency medical personnel, ambulance services and certified emergency medical response agencies. The changes make OSDH rules consistent with Oklahoma law and national standards.

The updated personnel license types are the emergency medical technician (EMT) and the advanced emergency medical technician (AEMT). The EMT and AEMT updates reflect changes in terms and standards at the national level. The modifications expand the services EMTs and AEMTs are allowed to provide to patients.

The requirements for emergency medical response agencies (EMRAs), previously known as first response agencies, were consolidated but the minimum standards were unchanged. EMRAs provide medical care less than ambulance services and more than basic first aid, cardiopulmonary resuscitation (CPR) and use of the automated external defibrillator (AED).

EMRAs work under the supervision of a medical director and have a sponsoring EMS transport agency. EMRAs often are seen in Oklahoma at public events like rodeos, football games and motorcycle races providing emergency medical care such as administering oxygen to patients.

As part of the update, OSDH reformatted and consolidated the rules around the various license categories to make it easier for EMS personnel and agencies to find their applicable requirements.

"The State Department of Health is grateful for the EMS community and other providers of time-sensitive care who assisted in developing the rule changes," said Brandon Bowen, manager of the Emergency Systems section of OSDH. "They contributed valuable time, energy and ideas during a three-year process to update the rules. OSDH could not have accomplished this without their support."

Unaffected by the rule changes are fire departments and other first responders who render only basic first aid, CPR and AED service, according to Bowen. Responders working at that level do not need an OSDH license.

For more information and a complete outline of the updated rules please visit <http://ems.health.ok.gov>.



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. My friend is dating a man that I believe is a narcissist. She is obsessed with him even though he treats her badly. I have tried to point out what seems so obvious but she does not want to listen. What should I do?

A. Narcissistic addictions are like cocaine, gambling and any other drug or behavior that provides us with a rush and a feeling of wanting more and more and more. There probably isn't much more that you can do: the best thing for your friend would be if her narcissistic boyfriend would drop out of sight for good. But unless she gets treatment she will find another one.

These relationships defy common sense. They are not logical and usually find people behaving in ways they never would under normal circumstances, such as:

- Putting up with being ignored
- Putting up with their partner being involved with other women or men
- Putting up with never being able to rely on them
- Putting up with long periods of unexplained absences
- Putting up with being lied to and deceived - even though you know you are being lied to and deceived.
- Putting up with them putting in little or no effort.
- Putting up with looking weak, like a fool, doormat or like you have no self-respect.
- Putting up with being allocated to the friend position.

The million dollar question is why?

The answer is - they're addicted to the high. The high is that moment where the object of their obsession is giving them their undivided attention. Where for a brief moment they feel loved, cherished and special.

The reasons for this are complex and can be any number of the following:

- Feeling starved for love and attention
- An addiction to the high intensity feelings
- Codependency
- They are used to poor treatment
- They live in a fantasy world.
- They've claimed some type of ownership of the individual and can justify sleeping with them even though we know they are involved with someone else.
- Low self esteem.

Your friend will suffer in this relationship and it will be hard for you to watch. Hopefully she will find herself in enough emotional pain that she will seek treatment.

2016 Jim Thorpe Courage Awards Presented

For 22 years, INTEGRIS Jim Thorpe Rehabilitation has presented Courage Awards to individuals who display exceptional bravery and grace through the most difficult of circumstances. We are proud to announce this year's winners: Carlos Dominguez, Sue Baney-Stull and Lorece "Jo" Rogers.

Carlos Dominguez

In April 2013, a driver under the influence of drugs changed Carlos Dominguez' life in an instant. He was paralyzed in a car accident that was no fault of his own. The then 18 year old faced an uncertain future when he came to INTEGRIS Jim Thorpe Rehabilitation, but he quickly proved he was up to the challenge. Carlos kept his head up and spirits high during his therapy and was able to eventually regain his independence. He has returned to college and has worked with officials at Cameron University to make the campus more handicap accessible for himself and others. He has also relearned how to drive using hand controls. Carlos became a certified peer mentor and routinely drives up from Lawton to speak with newly injured patients at Jim Thorpe. He also participates in an injury prevention program called "Think First," where he shares his story with students at area schools.

Sue Baney-Stull

In August 2014, Sue Baney-Stull developed sepsis from a viral infection. At one point, she was so ill doctors thought she would not survive. Both her legs and arms were amputated in order to save her life. After 50 days in the hospital, Sue began therapy at INTEGRIS Jim Thorpe Rehabilitation. A month of inpatient rehab was followed by nearly a year of outpatient therapy. The Jim Thorpe staff was impressed with her positive attitude, tireless work ethic and enduring optimism. Today, with the help of her prosthetics, there is almost nothing Sue can't do. She has gone skydiving, founded an organization for sepsis awareness and started an annual 5K walk/run in her name. She also pushed for a Sepsis Matters license plate that will be available in Oklahoma this fall.

Lorece "Jo" Rogers

In July 2015, Jo Rogers went hiking with her husband. She contracted Rocky Mountain Spotted Fever through a tick bite and ultimately went into septic shock. Her organs were failing. To stop the infection and save her life, doctors amputated all four of her limbs. After two months in the hospital, Jo was transferred to INTEGRIS Jim Thorpe Rehabilitation where she began to come to terms with her new reality. Her stubborn, no quit mentality accelerated her progress and less than a year after her illness, Jo achieved her first major milestone. She was able to walk into her son's high school graduation.

INTEGRIS Jim Thorpe Rehabilitation will honor these courageous individuals at the eighth annual Courage Awards presentation at the Oklahoma Sports Hall of Fame, 4040 N. Lincoln Blvd. in Oklahoma City Thursday, September 22nd from 11:30 a.m. to 1:00 p.m.

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Renae King, RN

My coworkers. If I didn't have them some days ... no bueno.



Jan Miller, RN



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