



Jason Martin - Maintenance Supervisor, Amanda Crawford - LPN, ADON, Marketing and Admissions, Pam Powell - CNA, Schedule Coordinator, Shauna Artho - RN, DON, MDS Coordinator
Casey Archuleta - Dietary Aid

by Bobby Anderson, RN - staff writer/photographer

Moving from Hugo to Guymon was about as far a move as Dan Stiles could pull off and still stay in Oklahoma.

"A lot of people think Oklahoma ends at Woodward," Stiles says with a laugh.

Guymon - a place where the wind definitely comes sweeping down the plains - is just under two hours

away from Amarillo. It's three-and-a-half hours from Denver and just 125 miles away from the end of the central standard time zone.

But Guymon itself is also a mecca for healthcare in Northwest Oklahoma and Stiles is in the middle of it all leading Heritage Community and Dunaway Manor.

Dunaway Manor is the only Skilled Nursing Facility in the Panhandle, the only Assisted

Living in the Panhandle and the only licensed and locked Memory Assisted Living in the Panhandle.

The stand-alone non-profit is not owned by any governmental agency, church or other entity and has been that way since 1962.

The facility offers long term care, Physical and Occupational Therapy, Respite Care, Assisted Living, Memory Care Assisted Living and Assisted Living

HERITAGE

Continued from Page 1

Respite care.

In 1960 a group of concerned citizens gathered and decided there needed to be a residence for senior citizens in Guymon.

Local veterinarian W.F. Dunaway and wife Mada donated a substantial sum which was matched by local residents for the facility to be built.

The residence was called Dunaway Manor.

Dr. Dunaway and wife also set up a foundation that is now called the Texas County Foundation.

Dunaway Manor is a 77-bed skilled nursing facility with long-term care and respite care offerings.

In the late 2000s, the fact that no assisted living properties existed became a topic of conversation.

In 2012 Heritage Community Assisted Living and Heritage Community Memory care opened.

The assisted living facility side has 25 apartments. The locked memory care unit has 15 residences.

All sit on land owned by the City of Guymon.

"We are not owned by anybody. We have a board of directors," Stiles

said, noting most board members are residents of Texas County. "Most are ranchers and farmers. I think we're the only one set up like this."

Stiles is actually the chief executive officer but goes by the title of campus director.

He says he was never much for titles and admits to no pretense on campus, just a focus on neighbors helping members.

"We have a ton of community support," said Stiles.

To that end, a group known as Helping Hands for Heritage took shape a little over a year ago with the specific aim at fundraising for projects needed on campus.

"It has been a good deal," he said.

Covid has hit the area hard. In fact, Guymon was the No. 2 site in the state in the number of Covid infections, fueled by positives at the local meat processing plant.

And while Guymon may be one of the most diverse cities in the United States - boasting 32 nationalities - the number of healthcare facilities is limited to Heritage Community and Dunaway Manor.

"The biggest problem we have out here is getting nurses," Stiles said. "You've got to want to live in the panhandle and there's a lot of different



Sitting is Lois Boston - the oldest Neighbor - 107 years old and Pam Powell - CNA, Schedule Coordinator waving.

opportunities out here."

Population growth has boosted Guymon to a Class 5A school, which means Guymon students travel around the state more than any other school.

"We are very big on culture change and patient-centered care," Stiles said. "We call (residents) neighbors that live in our neighborhood. I feel like when you get the staff and team to buy into that it's a whole lot different to take care of a neighbor than a resident or patient."

One of the great advantages Stiles has to offer his staff is the sheer number of opportunities they can choose from.

There's long term care as well as skilled nursing availability.

"But we always need people in assisted living which is a total different population to work with," he said. "There's also opportunities in memory care for working with patients with Alzheimer's and dementia. We offer a huge variety."

As healthcare reimbursement drives care out of the hospital faster, facilities like Heritage Community and Dunaway Manor are taking care of more

medically complex patients.

"People are being sent to us a lot sicker than they used to be," Stiles said. "We do a lot of IVs and wound care. We have several trachs in the building."

Right now Stiles' largest need is for charge nurses - LPNs or RNs - who are able to step onto the floor to take care of neighbors.

"Unlike the hospital or even a doctor's office the majority of the people you'll care for are going to be here long term," said Stiles, who noted even his skilled nursing side has an average stay of 35 days. "There are people in this building who have lived here for 10 or 11 years. You develop a close relationship with them. It's not 'Mr. Smith came in on Tuesday, had his hip replaced Wednesday and leaves on Friday.'"

"When they come here you're going to spend time with them so it's a more long-term atmosphere where you're caring for people you know. You grow very close and very attached to your people."

And your people quickly become your neighbors.

Heritage Community and Dunaway Manor is seeking: A Director of Nursing, Registered Nurses and Licensed Practical Nurses For more info, contact Dan Stiles at 580-338-3186, or email resumes to dan.stiles@guymonheritagecommunity.com

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CAREERS IN NURSING

MAKING A DIFFERENCE: CEDAR RIDGE BEHAVIORAL HOSPITAL

by Vickie Jenkins - Writer/Photographer

Cedar Ridge Behavioral Hospital is where they provide short-term, inpatient psychiatric and long-term residential services for children and adolescents. This is also where you will find Bridget Soliman, RN/Campus Supervisor. Bridget has been a nurse for twenty-three years and has worked at Cedar Ridge in child psychiatric nursing for three years.

Growing up in Midwest City, OK, she had big dreams when she was a little girl. "I actually wanted to be a Hollywood movie star but that didn't work out," she said with a smile. "My next choice was to be a nurse with a big push from my father, Carl Sawyer. He was huge in this area and he always encouraged me to do something in my life that would help others. He also put

everyone else before himself and that is a trait that I will always strive for. I was glad that he got to see me become a nurse before he passed away in 2011. He was proud of me and I can only hope that I can be half the human he was," Bridget said. "Both of my parents were supportive of me," she added.

Asking Bridget why she became a nurse and how she came about working with children, she replied, "It was my father and a dear friend that pushed me to do something with my life when I was twenty-eight. I realized that nursing was for me; there was such a flexibility in nursing so I thought I would give it a try, so I jumped in and did it! I attended OSU for nursing. I graduated at the age of thirty-three and my life changed forever, for the

better."

What qualities do you think make a good nurse? "I think a nurse needs to have compassion, empathy and sympathy when necessary. It's taking all of these qualities and rolling them into one. Teamwork and good organization skills play a very important part in being a nurse too. As far as being a leader or a follower, I think that I am a little of both. I know it would benefit me to be more of a leader but I am okay with being a follower too," she commented.

Bridget's biggest reward that comes from being a nurse is being a role model to her children. "I have a son who is going to nursing school and plans to get his practitioner as well," she said with excitement! A mother's pride was shining through.

What is your biggest challenge? "Since I am the Campus supervisor, of course, I want to make everyone happy. The scheduling and happiness of the others don't always go together but I do try but sometimes, I fall short. My goal is to have everyone working as a team from shift to shift," Bridget said.

Bridget has a busy day at work and starts pretty early. "The first thing I do as a floor nurse is start making a daily staff assignment and a security check. In mental health, security and safety are number one. Then, I pass medications and assess the patients at the same time. I then get vital signs and start charting. When the doctor comes in, I assist by bringing the patients in one

See SOLIMAN Page 5

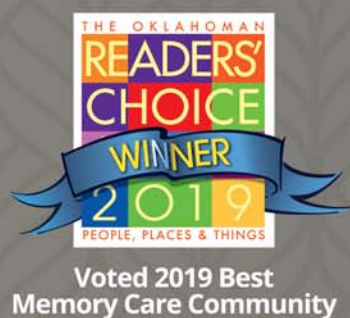


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Bridget Soliman, RN, is the Campus Supervisor at Cedar Ridge Behavioral Hospital, providing short-term and long-term residential services and inpatient psychiatric services for children and adolescents.

SOLIMAN
Continued from Page 4

by one. This is a perfect time for me to do some more charting, observe the doctor's assessment and any medications, upcoming discharges or potential residential transfers. I make sure the mental health techs are doing okay. I note any new orders and work on discharges. I usually get multiple phone calls from parents and staff," she commented.

Asking Bridget to describe herself, she said, "I am a pretty laid back person for the most part. I love to laugh and make people laugh. I like to stay organized and focused. I love

spending time with my family. I like to stay positive; I've always been the glass is half full person. My hobbies include swimming, Netflix, skating, and Facebook scrolling and TikTok."

How has the Coronavirus changed your life? "There are several things that I miss; going out to the movies and hanging out with friends. As a nurse, wearing a mask is so hard; it gets hot and conversations are hard to understand. I miss seeing people's smiles and miss them seeing mine."

Asking Bridget to sum up her life in one word, she replied, "Resilient and evolving. Sorry, but you get two."

SITUATION
UPDATE: COVID-19

- As of this advisory, there are 19,092 confirmed positive cases of COVID-19 in Oklahoma.
- There are 6 additional deaths; none occurred in the past 24 hours.
- *One in Garvin County, male in the 65 or older age group.
- *One in McCurtain County, male in the 65 or older age group.
- *One in Muskogee County, male in the 65 or older age group.
- *Three in Tulsa County, two males and one female in the 65 or older age group.
- There are 416 total deaths in the state.
- The Oklahoma State Department of Health announces the Oklahoma COVID-19 Alert System; a four-tiered risk measurement tool with corresponding color categories that identify the current COVID-19 risk level. This tool offers the public and local elected officials an easy way to recognize each county's risk level. OSDH will update the alert system every Friday in the 11AM Situation Update based on a 7-day rolling average of new cases.

For more information, visit coronavirus.health.ok.gov.

COVID-19
Oklahoma Test
Results

Confirmed Positive Cases	19,092
*Total Cumulative Negative Specimens to Date	391,982
*Total Cumulative Number of Specimens to Date	414,197
**Currently Hospitalized	487
**Currently Hospitalized	487
Total Cumulative Hospitalizations	1,949
Deaths in the Past 24 hours	0
Total Cumulative Deaths	416

*The total includes laboratory information provided to OSDH at the time of the report. Total counts may not reflect unique individuals.

**This number is a combination of hospitalized positive cases and hospitalized persons under investigation, as reported by hospitals at the time of the report. The data reflect a change in calculation and should not be compared to prior data.

***The purpose of publishing aggregated statistical COVID-19 data through the OSDH Dashboard, the Executive Order Report, and the Weekly Epidemiology and Surveillance Report is to support the needs of the general public in receiving important and necessary information regarding the state of the health and safety of the citizens of Oklahoma. These resources may be used only for statistical purposes and may not be used in any way that would determine the identity of any reported cases. Data Source: Acute Disease Service, Oklahoma State Department of Health. *As of 2020-07-10 at 7:00 a.m.

Oklahoma's Nursing Times

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Redlands tradition continues

No matter where nursing students come to Redlands Community College from, they find a home.

Maybe it's the friendly El Reno campus setting or maybe it's the streamlined program offerings.

Redlands Nursing Director Jalelah Abdul-Raheem, Ph.D., RN, likes to think it's the people.

"The thing I really think that makes Redlands stick out, particularly the nursing program, is it's such a community feel in the college as a whole," she said. "Everyone is willing to help each other. They're really friendly, even across disciplines."

"We get a mix of traditional and non-traditional students. We get a good amount of first-generation students, second-career students and those who definitely have to work so they can provide for their families."

Redlands Nursing Program graduated its first class in 1981. The program is a two-year nursing program

with new classes beginning in the fall of every year.

Students graduate with an Associate in Applied Science Degree and, upon graduation, are eligible to take the NCLEX exam to become a Registered Nurse.

Redlands also offers options for LPNs attending the nursing program. Students who are admitted for the LPN-RN course track are given credit for the first semester course, Nursing I.

"In the nursing department our faculty-student ratio is so small that we actually get to know our students and their situations and backgrounds," Abdul-Raheem said. "We help work with them where they can be successful despite some of the things typically that may be seen as a barrier such as a first-generation college student and not really knowing how to study or being that single mom that's trying to juggle work around school."

Redlands is very intimate setting.

Redlands admits students one time each year to the traditional day program. LPN to RN admission occurs for a handful of individuals in the spring.

The program threads theory and simulation together to help build understanding of the specific content being taught.

Simulations enhance student understanding, build confidence prior to clinical rotations as to what to do, say, and provide appropriate interventions for patients.

"To be honest all of the students end up getting a job," Abdul-Raheem said. "The things we hear from employers are that Redlands graduates do display a lot of compassionate caring and drive to learn as much as they can to be successful in the field. They're willing to do whatever is necessary to make sure

their patient is taken care of.

"I've had a couple agencies reach out to me - and we just started clinicals - about how much they enjoy Redlands students and graduates because they come in with that knowledge base and that drive to really change nursing for the better."

A new simulation program has helped expand the student's experiences in a community setting.

Redlands perennially has a high job employment placement rate.

"I feel like the faculty works great together," she said. "It's a culture of teamwork and showing others - faculty and students - that we care. They're willing to go that extra mile and it really translates to our students. Our students learn how to be professional by being accountable, responsible and understanding expectations."

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ANA DISAPPOINTED IN THE SUPREME COURT OF THE UNITED STATES' RULING TO STRIKE THE ACA CONTRACEPTION MANDATE

The American Nurses Association (ANA) is disappointed in the 7-2 ruling of the United States Supreme Court to strike down the Patient Protection and Affordable Care Act's (ACA) requirement for health insurance plans to cover the total costs of contraception. Millions of women currently rely on employer-sponsored health insurance plans for birth control at no costs.

When it comes to reproductive health, ANA believes health care consumers have the right to access high-quality health care while also retaining the right to make decisions about their personal health and the reproductive services that they seek. ANA fully supports access to contraception and contraception counseling as essential components of effective health care for all as well as nurses' right to refuse participation in a particular case based on ethical grounds, unless the patient's safety is at risk.

ANA has historically and consistently advocated for the health care needs of all, including services related to reproductive health. ANA signed on to an amicus brief in support of the respondents, the Commonwealth of Pennsylvania and the state of New Jersey, which argued that access to high quality health care as well as comprehensive and evidence-based reproductive health services is an essential part of healthcare for women. ANA joined the American College of Obstetricians and Gynecologists, the American Academy of Nursing, Physicians for Reproductive Health, and Nurses for Sexual and Reproductive Health as amici in this brief.



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Kelly Briggs, MSN, APRN, FNP-C, is a board-certified Family Nurse Practitioner. Briggs earned her master's degree in nursing from Maryville University in St. Louis, MO. She is interested in acute care medicine and stated, "As a result of my experience in practicing medicine, I have found there is a profound need for palliative care services and the vital role an advance practice provider plays in increasing the quality of life for patients with a chronic medical diagnosis. Initiation of palliative care services enhances treatment and prevention of suffering. I will also observe each patient's spiritual, cultural, physiological, mental and familial aspects of care."

Naomi L. Miller, MSN, APRN, FNP-C, is a board-certified Family Nurse Practitioner. Miller earned her master's degree in nursing from South University in Savannah, GA. She is very passionate about teaching. "Helping patients become educated about their health is what drives me. Dealing with an illness as it progresses is hard, not only on the patient, but on the caregiver and family. My mission is to make them as comfortable as possible for everyone involved."

Sheena Musgrove, MSN, APRN, FNP-C, is board-certified Family Nurse Practitioner. Musgrove earned her master's degree in nursing from Maryville University in St. Louis, MO. Musgrove states, "I am honored to be a part of this health care team and my goal is to improve the quality of life for every patient I treat. I listen to each patient's struggles, strengths and find out about their support system to assist with developing a plan of care that honors their wishes. I want to make a difference in my patient's lives and focus on the things that my patients can do to enjoy life while balancing the struggles of dealing with a serious illness."

For more information, call INTEGRIS Palliative Care at 405-603-6928.



Kelly Briggs, MSN, APRN, FNP-C



Naomi L. Miller, MSN, APRN, FNP-C



Sheena Musgrove, MSN, APRN, FNP-C

NURSE TALK

My biggest pet peeve is when someone doesn't wash their hands!



Gretchen Chafey, RN

When someone is late....tardiness!



Shelly McKay, RN

What is your biggest pet peeve at the hospital?

INTEGRIS
Community Hospital

Integris
Community
Hospital -
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What bothers me more than anything? Laziness!



Cindy Smith, RN

When someone says they are going to do something and they don't! Not following through!



Sarah Sehhati, ER Tech

Compassion Runs in the Family of this Father-Daughter Duo

Max Barnes and his daughter Rachel Barnes both have a servant's heart. Their passion for helping people is evident in their career choices.

Max is a 25 year veteran of the Oklahoma City Fire Department and Rachel is a nurse at the Paul Silverstein Burn Center at INTEGRIS Baptist Medical Center.

It isn't a coincidence they chose similar professions, Rachel says she learned the meaning of compassion and duty by watching her father. Max quickly deflects the praise, saying Rachel is a loving soul who is naturally full of grace.

Professionally, this father and daughter work in conjunction with each other. Max puts out fires, while Rachel cares for those injured in them.

INTEGRIS Health and the Oklahoma City Fire Department are proud to profile this first-responder duo and want to thank them for their commitment to the community.

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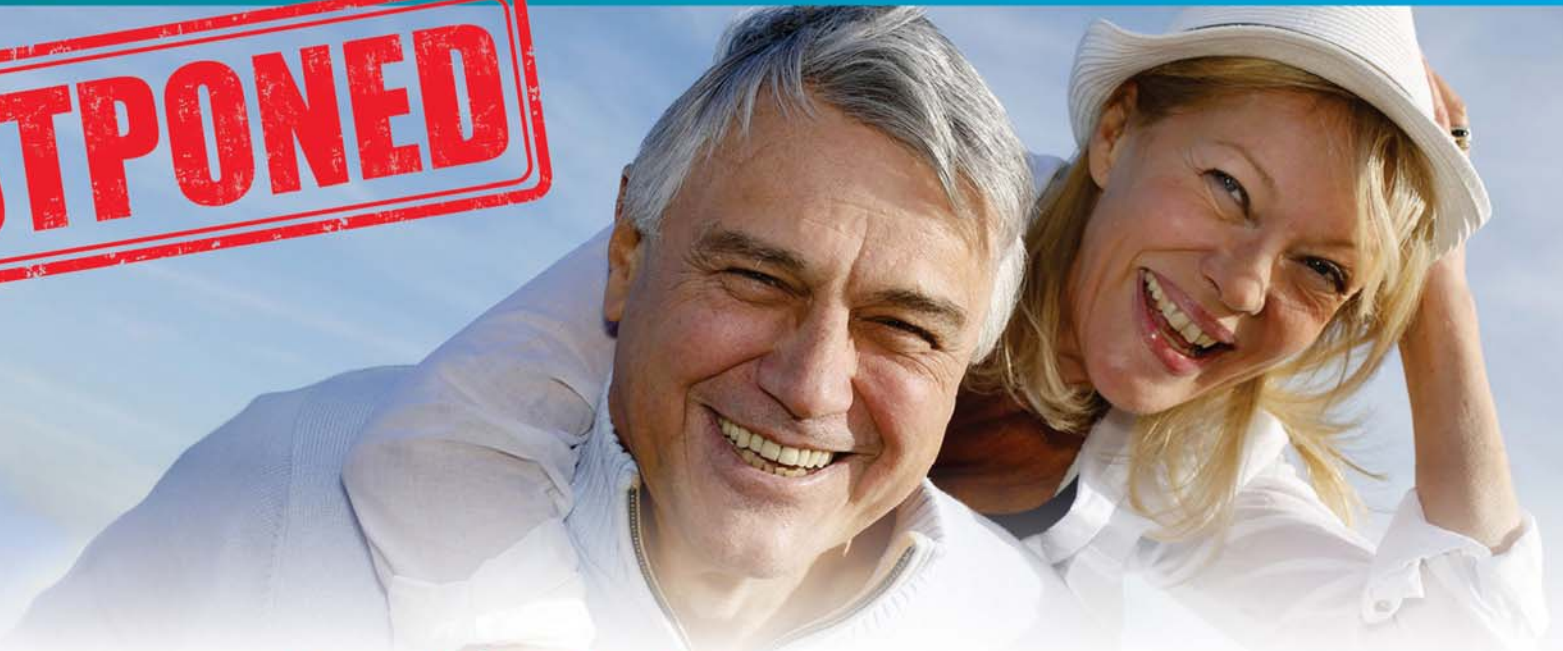
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COVID-19 Antibodies Examined in Healthcare Workers

OU Medicine, OU Health Sciences Center and Oklahoma Blood Institute are collaborating on a project to determine the prevalence of Oklahoma healthcare workers who have previously been infected with the COVID-19 virus. In addition, the antibodies of those who test positive for previous infection will be analyzed for their ability to protect against future COVID-19 infection. The Oklahoma Blood Institute will offer testing through its existing partnerships with healthcare facilities across Oklahoma. Through mobile blood drives around the state or at OBI donor facilities, healthcare workers can be tested for COVID-19 antibodies while donating much-needed blood for Oklahoma's supply. If their tests show a previous infection, they have the option of donating their plasma to be used as convalescent plasma treatment in seriously ill patients with COVID-19.

In addition, COVID-19 antibody tests will be offered on the campus of the OU Health Sciences Center to all employees of OU Medicine, OU Physicians and OU Health Sciences Center, whether or not they work in a clinical setting. In total, the study aims

to test 8,000 workers at healthcare facilities in Oklahoma. Altogether, the test results should provide insight into how the state's healthcare population has been affected.

"The virus has had a disproportionate impact on healthcare workers around the world," said Tim VanWagoner, Ph.D., deputy director of the Oklahoma Clinical and Translational Science Institute, a campus initiative that is spearheading the project. "It makes sense for us to focus these early serological studies to better understand the prevalence of COVID-19 antibodies among healthcare workers. Because a high number of individuals are asymptomatic after infection, many people are very interested in knowing whether they may have been previously exposed and might have some protection against future infections." OU Medicine's high-complexity laboratory will test the samples provided by OBI and others from OU employees. However, some tests will be administered using lower-complexity devices that can be used to provide rapid results in a variety of settings. The results will be compared and verified to determine whether

they are as accurate as laboratory testing, VanWagoner said.

Researchers at the OU Health Sciences Center will lead investigations into the antibodies of those who were previously infected. The studies will focus on whether the antibodies have the ability to block the virus from infecting cells and, if so, the amount of antibodies needed to do so, said OU Health Sciences Center virologist James Papin, Ph.D.

"We are interested in whether antibodies made by previously infected individuals have the ability to neutralize the virus," Papin said. "While we have some evidence that individuals who have recovered from COVID-19 possess antibodies that can protect from re-infection, what we do not know is how long those antibodies persist or if antibodies produced during asymptomatic infection can protect against re-infection. As part of the testing, we will determine the highest dilution of antibodies that can block the virus from infecting cells, as a higher dilution indicates a stronger response and thus greater chance of protection from re-infection."

The OU Health Sciences Center is

qualified to conduct these tests because of its Biosafety Level 3 Laboratory, a requirement for working with live SARS-CoV-2, the virus that causes COVID-19, Papin said. The facility includes multiple safety protocols, including extensive personal protective equipment and clean airflow that is HEPA-filtered and not re-circulated.

After this round of testing and research, the project will broaden into community settings for non-healthcare workers, which will be particularly important if infection rates continue to rise, VanWagoner said.

Because of its longstanding collaborations with Oklahoma healthcare facilities, OBI is well-positioned to gather samples from a cross-section of the state.

"OBI is excited to team with OU's scientists to understand the impact of COVID-19 on the frontline heroes who have been caring for patients throughout the pandemic," said John Armitage, M.D., president and CEO of Oklahoma Blood Institute. "We owe these great healthcare workers not only our respect and admiration, but our best efforts and research to protect them."

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