

Exceptional nursing



Nursing staff fights for COVID-19 patients

In December Tyler Grantham became the chief nursing officer at Select Specialty Hospital during a historic time when nurses respond heroically to an international pandemic.

by James Coburn, Staff Writer

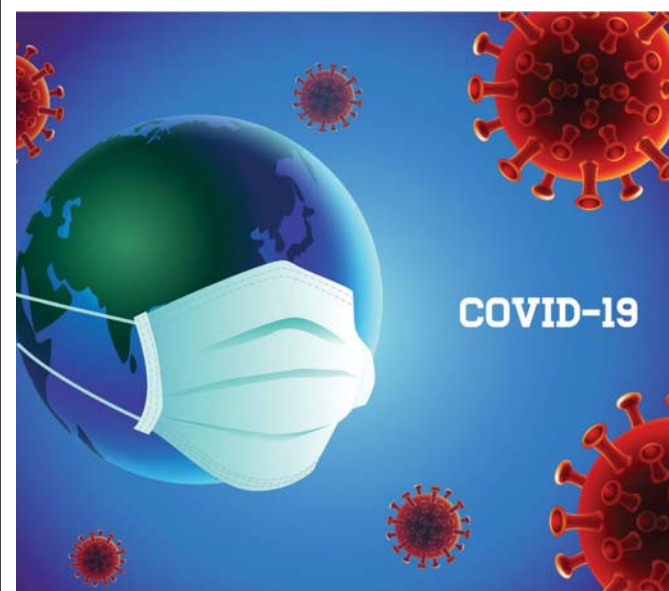
Select Specialty Hospital nurses are challenged to save people's lives both day and night in the war against COVID-19.

"It's really great to see them step up, because these patients are a lot sicker than any that we're used to taking care of," said Tyler Grantham, chief nursing officer.

"It's been a transition to deal with these sicker patients and not have the support with it. I mean we've had to go through nursing shortages across Oklahoma, but the patient populations have just gotten

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Collaboration on Nurse Workforce Initiatives Announced



OU Health and the Fran and Earl Ziegler OU College of Nursing are collaborating to bring additional nurses into the workforce, a critical need during the COVID-19 pandemic.

OU Health and the OU College of Nursing have created the Senior Nurse Intern Program, which pairs senior nursing students one-on-one with RNs in critical care units at all three OU Health hospitals, giving students in-depth experience as they prepare to begin their own careers. The program, which was first launched at OU Health, is now being implemented at hospitals across Oklahoma.

In addition, the OU College of Nursing is seeing increased interest in its Nursing Refresher Course, a program that updates knowledge and skills for nurses who have been out of the workforce but want to reactivate their licenses so they can return to the

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GRANTHAM

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higher."

Some of the patients feel like they're going to die, Grantham said. Being able to see them recover and leave the hospital makes the whole hospital feel they've made a difference, said Grantham, 29.

The long-term acute care hospital specializes in caring for critically ill patients. Patients who are transferred there have been hospitalized in a hospital ICU for at least three days, said Select Specialty spokeswoman Tracy Cain.

The 72-bed, free-standing hospital has 12 dedicated ICU beds for critically ill patients on endotracheal tubes, vents, and different types of drips. There are 60 regular floor beds. Best practices include vent management, weaning, tracheotomies, wound care, physical therapy, occupational therapy, speech, and cognitive therapies.

Nurses and therapists get patients walking, talking, breathing, thinking, and eating again. An average hospitalization time is 25

days or more. Patients are prepared to make the transition to home health, a rehab or skilled nursing facility. Referrals are accepted from all of the different hospitals in the Oklahoma City metropolitan area as well as other parts of the state.

"We deliver the same level of care that you can get at one of the major hospitals in Oklahoma City," Grantham said. "We have a longer time frame to get it done. Instead of a week for a few days to get someone off a ventilator we have an average of 25 days. We're able to work with the patient a little more. It's that longer time that kind of gives us that advantage of being able to see them come in so sick, but also walking out of here, too."

He first came to Select Specialty as a nursing student before being hired there as an ICU nurse who worked his way up to nurse manager and the director of quality.

Grantham entered health care to make difference every day he goes to work.

He earned his Bachelor in the Science of Nursing degree at Langston University, followed

by receiving a Master of Science in Health Care Administration at Oklahoma State University.

The majority of COVID-19 patients are older than 65, however Select Specialty accepts patient as young as 18. To say that patients are excited to leave the hospital is an understatement. They arrive worn out from the struggle.

"You see a lot of relief in the patient and the family being able to see that they're progressing in getting back to that normal life," Grantham said.

Nurses have had to adapt to life with the pandemic as well. At first there was a lot of fear of the unknown among the nursing staff, Grantham said.

"I don't want to say it's turned normal yet, but it's kind of turned into 'this is what we're dealing with,'" he continued. "We've had to adapt to the situations. Nurses are obviously good at adapting to situations in general."

Nurses learned all the personal protective equipment guidelines quickly while caring for a new type of patient. But being the caring hands that rescue lives from COVID-19 puts nurses at risk for


disease that is more contagious than influenza, according to the Centers of Disease Control and Prevention.

Oklahomans have always been willing to help one another during a crisis. Nurses will be less likely to contract COVID-19 if Oklahomans spend more time at home, avoid large social gatherings, wear a mask in public, and by washing their hands often, Grantham said.

"Really to protect the nurses is to be able to minimize the number of patients we have come into the hospitals," Grantham emphasized. "So, if it's a controlled number of patients it's going to be a lot easier to manage."

Nurses arrive at work every day without complaints, he added. Nurses compensate by working extra shifts, working overtime, and by still meeting the challenge of staying safe and healthy.

"When you are faced with this amount of patients coming your way — you have to protect yourself," said Parfait Fobasso, RN. "This is the time that if you are a nurse, you have to be proud to be a nurse."



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WORKFORCE

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patient's bedside.

"As Oklahoma's comprehensive academic healthcare enterprise, we employ hundreds of nurses at our three hospitals and have a need for nurses within OU Health Physicians clinics as well. We are grateful for the experienced, compassionate care they provide our patients each day," said Cathy Pierce, MS, RNC, CENP, Chief Nursing Executive for OU Medicine, Inc. "Because OU Health represents the combined efforts of OU Medicine and the OU Health Sciences Center, we take great pride in our mission to prepare the next generation of nurses. We are working closer than ever with the OU College of Nursing to give student nurses the knowledge and skills they need to care for our patients, which is especially important now as so many Oklahomans are suffering from COVID-19."

OU College of Nursing Dean Julie Hoff, Ph.D., MPH, RN, said the combination of the programs – giving students more clinical experience and assisting nurses in returning to the workforce – is at the heart of the mission of an academic healthcare system. "As a college, our primary aim

is to educate future nurses prepared to provide evidence-based nursing care to patients and families," Hoff said. "Our collaboration with OU Health amplifies that mission in a mutually beneficial manner."

In the Senior Nurse Intern Program, senior nursing students work closely with nurses across the patient care units at OU Health's three hospitals – the University of Oklahoma Medical Center, Oklahoma Children's Hospital, and Edmond Medical Center. This one-on-one experience provides a unique opportunity for students to immerse themselves in the practice of nursing under the mentoring of an experienced nurse.

Another unique aspect of the program is that senior nursing students are paid for their work as interns. Supporting them monetarily helps as they spend long hours in the hospital while still taking steps toward beginning their own careers. Nursing students complete their clinical hours and have the opportunity to continue to work as a nurse tech.

"We have already received very positive feedback about this program," Pierce said. "Being paired one-on-one with nurses allows the students to ask more questions and be truly embedded in the daily activities and

responsibilities of a practicing nurse. The students advance their knowledge and skills in prioritization, delegation, and how to handle multiple complex situations at one time, while the nurses play a major role in preparing the students who will soon join them in the workforce. We believe this program will help shape the professional formation of nurses in Oklahoma and we are excited to see it expand statewide."

Although the Nursing Refresher Course is not new, it is seeing renewed interest during the COVID-19 pandemic. The course is geared toward RNs and LPNs whose licenses have become inactive for any reason, such as taking time off to raise a family or caring for a loved one who is sick. The OU College of Nursing provides the educational portion, which is offered online and allows participants to work at their own pace. The clinical part of the course is offered in conjunction with Oklahoma's CareerTech System, whose participating technology centers place participants in hospitals near where they live.

The content of the Nurse Refresher Course is the same basic subject matter that they learned in their own initial training, but updated as elements of the profession have

changed. Participants have a year to complete the program, but many finish before then because they work more quickly through the online component.

"This course provides nurses everything they need to reactivate their licenses," Hoff said. "Given the caring nature of nurses, it's no surprise that we are seeing more interest in the course at this time. The course is also helping people whose significant other has lost a job because of the COVID-19 pandemic, but with a nursing background, they can take this course and return to clinical practice. The framework of this program is also beneficial in that participants can obtain their clinical hours at a technology center or hospital in their community."

"Both the Senior Nurse Intern Program and the Nursing Refresher Course are essential for addressing Oklahoma's nurse shortage, which has become more serious during the pandemic," Hoff added. "The collaboration of OU Health and the OU College of Nursing is making this possible. Because we are partners in one health system, we have a unique opportunity to develop programs that ultimately benefit the patients we serve."

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CAREERS IN NURSING

NURSES LEAVE A LITTLE PIECE OF HEART IN PATIENT'S ROOM

Vickie Jenkins, Staff Writer

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When you walk into Summit Medical Center, Edmond, OK, you will find pleasant surroundings. With a staff of exceptional professionals, you will know that you have come to the right place. Meet Marilyn Dye, RN, BSN, Director of Inpatient Services. Marilyn has been a nurse for twenty-five years and continues to prove her genuine love and concern for each patient.

Marilyn explains why she became a nurse. "I knew that I wanted to become a nurse at a very low point of my life. My son was born with Hypo Plastic Left Heart and had to have immediate heart surgery at

Children's Hospital. The care of my son was intense. The doctors and nurses made our family feel at ease every step of the way. The holistic care my son and family received was methodical, gentle, compassionate and inspiring. Though we lost our son, their care and compassion made such a difference in our lives. I knew that I wanted to someday be that comfort for another family."

"As fate would have it, my first job was in labor and delivery at Presbyterian Hospital. Being a labor and delivery nurse, I was able to experience the joy of new life, and the sorrow of loss. It was such a God given gift being a part of bringing new life into the world, but my heart was drawn to families experiencing

loss. Because of my desire to support mothers suffering the loss of a child, I joined the pastoral staff in creating an intricate Infant Bereavement program. My longing to make a difference in the lives of a woman experiencing the same grief I had experienced came full circle. I was blessed to work in this area of nursing for many years," Marilyn commented.

"After several years of labor and delivery nursing, which includes the new Life Center at Mercy hospital, my career took a turn. I accepted a position at Summit Medical Center as the Director of Inpatient services. Working at Summit Medical Center for the last eight years has been a gift," Marilyn said.

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Marilyn Dye, RN, BSN is the Director of Inpatient Services at Summit Medical Center. Her genuine love and compassion shines through each day.

DYE

Continued from Page 4

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"Another great outcome of this ratio is my nursing retention. My night shift retention great has been one hundred percent for the last five years. My day shift retention has been one hundred percent for the last two years. I have been in a leadership position for many years and have not seen this type of retention. Summit Medical Center makes it easy to provide the care every nurse desires to give," Marilyn added.

"Being a nurse isn't easy, in

fact, it is a career that can be extremely demanding. Today, most nurses work twelve hour shifts. Taking care of patients in various levels of need can be physically and emotionally challenging, especially for twelve plus hour shifts," Marilyn said. "Every nurse strives to give educated and efficient care, but in addition to this, many nurses leave a little piece of their heart in every patient's room. So, when I was asked, what qualities make a good nurse? The answer was easy. A truly great nurse is competent, compassionate and brings a positive attitude to work every day," Marilyn added.

"Nurses are typically the healthcare professionals the patients spend the most time with. Because of this, attitude is everything when it comes to nursing," Marilyn said with a smile.



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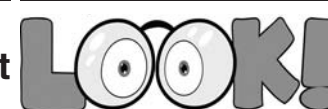
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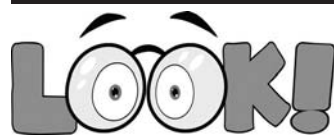
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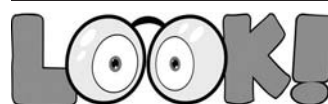
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Rubicam Recognized as CTCA Daisy Award Winner

Angela Rubicam was recently recognized at Cancer Treatment Centers of America® (CTCA) Tulsa as winner of this quarter's DAISY Award. The DAISY Award is an international program that rewards and celebrates the extraordinary, compassionate, and skillful care given by nurses every day. CTCA Tulsa® is proud to be a DAISY Award Partner and have the chance to regularly recognize one of its nurses with this special honor.

Ever since she was a little girl, all Angela ever wanted to be when she grew up was a nurse. Angela was always the one who would be there for others when they would get hurt or needed help, and she applies that same desire to be there physically and emotionally to the patients she services.

Prior to CTCA, Angela worked as a nurse in the medical-surgical

and orthopedics areas for other local hospitals. She came to CTCA nearly eight years ago and loves caring for her oncology patients and their loved ones, as she draws on her experience of being a caregiver for loved ones with cancer.

"I have watched family members go through cancer and cancer treatment, and as I care for my patients at CTCA, I am able to draw from that experience to connect with and understand what they are going through. I try to slow down and spend time with my patients and really show that I am listening and that I care what they have to say. Being able to sit with them and hold their hand if they have gotten bad news or celebrate with them when they receive good news are both so important to me. I want my patients to always feel like they have a friend



Angela Rubicam was recognized as winner of this quarter's DAISY Award.


when they are getting treatment and to know that they are not alone in this fight," said Angela.

One of Angela's patients shared her experience and appreciation of Angela:

"I have watched Angela over a period of almost three years develop into a leader of her peers. Angela shows compassion and true interest for every patient she cares for, and her knowledge and expertise in her role in the infusion center is impressive. She is often the nurse that trains other clinical staff who are new to the department, and she has also taken on a charge nurse role for the department. On more than

one occasion over the past few years, I have witnessed Angela sitting with her patients, assuring them that they will be okay during their infusion, and I was one of those patients as well. Starting a new chemotherapy regimen is an unnerving feeling, as is receiving not-so-positive scan results, but Angela was able to calm those fears for me and help me work through it."

Angela and her husband have been married for six years, have a three-year-old son, and are expecting their second child in June of 2021. Angela loves to attend concerts and sporting events, as well as travel and visit friends.



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INDUSTRY APPLAUDS PANEL FOR MAKING RESIDENTS AND STAFF THE HIGHEST PRIORITY

Calls On Governors To Ensure Long Term Care Residents And Staff Are The First To Receive The Vaccine Within The Phase "1a" Distribution

The American Health Care Association and National Center for Assisted Living (AHCA/NCAL), representing more than 14,000 nursing homes and assisted living communities across the country that provide care to approximately five million people each year, released the following statement in response to the decision by the Advisory Committee on

Immunization Practices (ACIP), a panel of the Centers for Disease Control and Prevention (CDC) to include long term care residents and staff, including nursing homes and assisted living communities, for the first round "1a" of vaccine distribution.

The following statement is attributable to Mark Parkinson,

See VACCINE page 10

(AS PUBLISHED IN THE 2020 EDUCATION GUIDE TO NURSING)

Flexibility key to an OC degree



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Those are just two of the selling points at the Oklahoma Christian University's School of Nursing, according to Jennifer Gray, PhD, RN, FAAN associate dean.

"It allows students to work at their own pace," Gray said.

Regular shifts, family - a life outside of work - all come into play for today's nurses seeking to advance their degrees.

That's why OC Nursing tailors coursework to the individual's timeframe.

"It's all online," Gray said. "I love the flexibility of it. My experience has been that nurses in practice have a lot of expertise that we don't give them credit for in the education setting. One of the things I like about this program is it's designed to let nurses build on their expertise and move through quickly."

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Pre-assessments allow students with the proper knowledge base to test out of certain classes.

Nine competencies are targeted, some allowing pre assessments to

evaluate knowledge.

"They can take the pre-assessment and if they score 85 percent or higher they don't have to do anything related to that competency," Gray said. "They get credit and their transcript will have (the corresponding) courses and grades."

Competency-based education (CBE) means a registered nurse's training, education and work experience allow them to earn college credits for what they already know. Skip class for skills mastered on the job by testing out of that segment and earning college credit.

You can start an online, four-month subscription to the course material and test out of as many classes as possible for around \$4,000.

Gray said the next cohort is forming now with an expected March 2 kickoff. After that another will begin in May with no caps on enrollment.

"We adjust the number of faculty members based on the number of students," Gray said. "A faculty mentor is assigned to each individual student and stays with them throughout the program monitoring progress, evaluating and really just being a coach right there with them all the way through the program."

Students are allowed to work at their own pace and pay a flat rate for each term. Gray said students range

from taking the full three terms to finishing in just one.

"I think most nurses if they have family or any other responsibility it's probably going to be three terms," she said. Oklahoma Christian's RN-to-BSN perfectly prepares students for graduate school. Courses will require writing scholarly papers and preparing professional presentations to fully equip you to pursue a

master's degree.

Many schools offer BSNs using a pass/fail grading system, OC students earn grades and graduate with a cumulative grade point average (GPA) and a full transcript. Graduate schools require a GPA for admittance and Oklahoma Christian makes sure students graduate with all they need to advance their careers even further.

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VACCINE

Continued from Page 8

president and CEO of AHCA/NCAL: "On behalf of our long term industry, we applaud the ACIP for prioritizing our residents and caregivers for the first distribution of the COVID vaccine."

"More than 100,000 long term care residents have died from this virus in the U.S. and our nursing homes are now experiencing the worst outbreak of new cases since last spring with more than 2,000 residents succumbing to this virus each week."

"Given the asymptomatic and pre-symptomatic spread of this virus combined with the explosion of community spread across the U.S., we are extremely hopeful this vaccine will literally be a

lifesaver for thousands of residents and expedite the reopening of our facilities to family members and loved ones."

"Now it is up to the governors and state health agencies to implement these recommendations and ensure our long term care residents and staff are prioritized in the actual rollout of the vaccine to provide this protection as soon as possible."

"The long term care industry, including nursing homes and assisted living communities, now call on governors from all 50 states to ensure long term care residents and staff are the first group to receive the vaccine within this initial Phase '1a' distribution to save as many lives as possible."

For more information please visit www.ahcancal.org/coronavirus.

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Oklahoma's Nursing Times



We could have lost Claire to bone cancer. Surgery and chemotherapy saved Claire's life. An organ and tissue donor saved Claire's leg. A piece of bone donated by a 33-year-old woman replaced the cancerous part of her femur. In time, they have grown together to form a new bone. We are so grateful that someone, in the midst of a tragic loss, made a generous decision to become an organ and tissue donor. We often think of her and what a wonderful gift she gave our family.

Organ, eye and tissue donation saves lives. Please make your decision to donate life and tell your family. Register to be an organ, eye and tissue donor on your Oklahoma driver's license or state ID card or register online at www.LifeShareRegistry.org. You may also call 800-826-LIFE (5433) and request a donor registration card.

Claire

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NURSE TALK



I would be a Yorkie because I would get to live indoors. Plus, I would be smart and loyal!



Kyra Dillingham,
Radiology Tech

I would be an eagle to soar the skies in majestic beauty and grace.



Anita Conway, RN

If you were an animal for one week, what would you be and why?

INTEGRIS
Community Hospital

Integris
Community
Hospital

I would be a bear. I am instantly protective, like a mama bear!



Hiedi Huntley, RN

I would be a grizzly bear...PROTECTOR!



Ryan Mussatto,
Paramedic

Mercy COVID Care @ Home Program to Expand Bed Capacity

As COVID-19 continues to surge across the country, there is significant demand for hospital beds. To address this need, Mercy is tapping into its Mercy Virtual expertise to care for select COVID-19 patients at home.

Mercy COVID Care @ Home will offer remote, in-home care for patients with mild symptoms who may need low-flow rates of oxygen, offering virtual home monitoring in real time. This 24-hour care will include measurement of oxygen saturation by pulse oximetry, adjusting oxygen flow as necessary, along with additional evaluations and appropriate interventions.

"We have learned that not all patients who were admitted at the onset of COVID-19 need to be hospitalized," said Dr. Carter Fenton, medical director of Mercy Virtual vAcute. "By caring for select patients at home, with ongoing

monitoring and management, we can reserve the hospital beds for those with more serious disease symptoms."

If the status of any patient changes during monitoring or symptoms worsen, patients will be evaluated by the Mercy Virtual team and directed to the most appropriate level of care. An emergency medicine physician will help determine the type of care the patient needs – from an in-home visit, evaluation in one of the outpatient clinic offerings or the hospital setting.

"Providing the opportunity for care in different settings is extremely important – for both the patients as well as our medical teams," Dr. Fenton said. "The challenging part for patients is determining their needs and our Mercy Virtual providers will help them through that process."

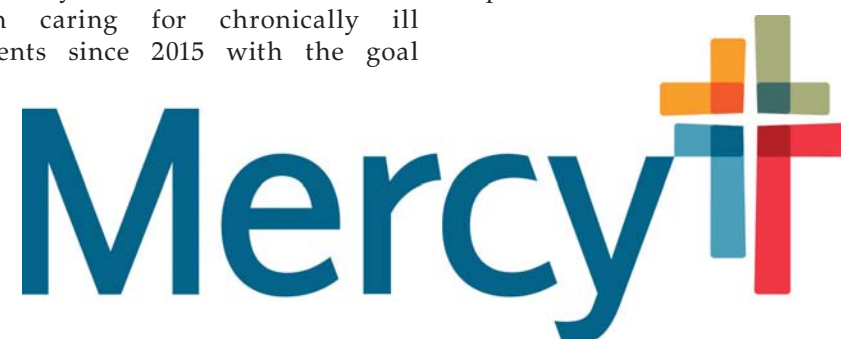
Much more is understood about

COVID-19 since the beginning of the pandemic, from new therapies to best practices, and health systems across the country are learning from each other. Mercy worked with Northwell Health, New York's largest health care provider, to gain insight from its experience of setting up a similar program during the first surge in the spring. Northwell Health was able to provide care with equal or better outcomes in an at-home setting.

Mercy Virtual's care team has been caring for chronically ill patients since 2015 with the goal

of keeping patients comfortable at home and out of the hospital.

"We're able to take our five years of experience in providing virtual, in-home care and translate it into caring for COVID-19 patients," added Dr. Gavin Helton, Mercy Virtual president. "We hope by caring for certain COVID-19 patients in their homes, it will make them more comfortable and still connected to care, while lightening the load on hospital caregivers and in-patient resources."



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SITUATION UPDATE: COVID-19

Cases	208,875
*Total Cumulative Negative Specimens to Date	1,982,769
*Total Cumulative Number of Specimens to Date	2,199,782
Acute Care OSDH Licensed Facility Hospitalizations	1,501
Other Types of Facilities Hospitalizations	107
Total Cumulative Hospitalizations	12,949
Total Cumulative Deaths	1,860

- The sharp increase in new cases reported today (4,827) is largely attributable to an issue with the PHIDDO reporting system, which resulted in a number of cases being backlogged until today. After further review, the case level should have been reported as roughly 3,000 cases per day on 12/2, 12/3 and 12/4.
- Of the 4,827 cases reported today:
 - *98% had a specimen collection date of 11/19 or more recent
 - *86% were collected this week
 - *11% were collected last week
 - *2.6% were collected prior to 11/22
- This week, 76 Oklahoma counties are in the "orange" risk level for the COVID-19 Risk Level System. OSDH continues to monitor closely the statewide hospitalization trends for COVID-19.
- The COVID-19 Risk Level System will be updated every Friday in the Situation Update at 11:00 a.m. This week's map can be seen in this update below the test results chart.
- As OSDH continues to meet with stakeholders across the state, the COVID-19 Risk Level System is subject to further revisions as science and public health guidance advances with the ongoing pandemic.
- As of this advisory, there are 208,875 cases of COVID-19 in Oklahoma.
- There are 24 additional deaths identified to report.
- There are 1,860 total deaths in the state.
- For more information, visit <https://oklahoma.gov/covid19.html>.

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

***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 2020-12-04 at 7:00 a.m.

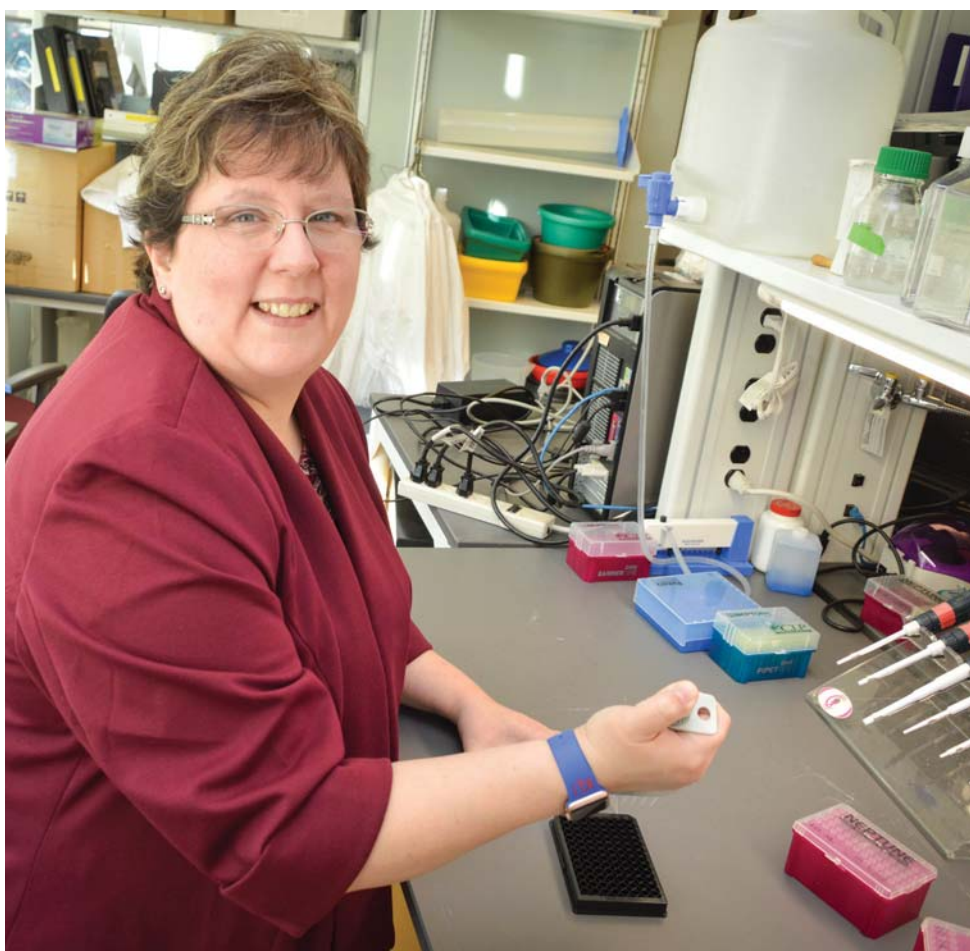
American College of Rheumatology recognizes OMRF scientists

Three Oklahoma Medical Research Foundation scientists were recently recognized for excellence at the American College of Rheumatology meeting, the world's largest annual conference for the field.

OMRF senior research assistant Sherri Longobardi received the Sjogren's Foundation's Outstanding Abstract Award for her work

the disease challenging to detect, and a lip biopsy is often required to confirm a diagnosis. Since beginning her research in 2016, Longobardi has identified eight new markers, paving the way for a blood test with accuracy rates as high as 93%.

Darise Farris, Ph.D., who mentors Longobardi at OMRF and holds a \$2.7 million Sjogren's grant



Oklahoma Medical Research Foundation scientist Melissa Munroe, M.D., Ph.D.

in identifying new methods for diagnosing Sjogren's syndrome, where immune cells attack moisture-producing glands, causing symptoms that include severe dry eyes and dry mouth, fatigue, joint pain and rashes. There are currently no approved treatments for the illness.

Current blood tests to diagnose Sjogren's look for biomarkers found in just 60% of patients, making

from the National Institutes of Health, noted the work is a major step forward in the field. "This a significant discovery that could better diagnose patients and save a large portion from a painful lip biopsy and extensive testing."

OMRF scientists Eliza Chakravarty, M.D., and Melissa Munroe, M.D., Ph.D., were also recognized for outstanding abstracts at the meeting. Their separate



OMRF scientist Sherri Longobardi received the Sjogren's Foundation's Outstanding Abstract Award for the 2020 conference.

projects focused on better understanding aspects of the autoimmune disease lupus.

Chakravarty helped lead a multi-site NIH trial to determine whether patients can safely stop taking a lupus medication — mycophenolate mofetil — associated with numerous side effects. The study determined that patients with stable disease may be able to stop the medication without added risk of disease flare.

Munroe's project examined specific inflammatory and

regulatory imbalances in the blood that may help clinicians better predict and identify which relatives of lupus patients will go on to develop the condition.

"The American College of Rheumatology meeting is a gathering of the brightest minds in the field," said OMRF Vice President of Clinical Affairs Judith James, M.D., Ph.D. "The recognition of these investigators and their teams is yet another nod to OMRF's critical work in understanding and treating autoimmune diseases."

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