Oklahoma's Nursing Times

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Joy Mathews, RN manager - CCU/PCU and Debbie Pender, RN, chief nursing officer/VP patient care services at SSM Midwest review the recent implementation of Epic at the Midwest City hospital.

SSM Midwest implements Epic

by James Coburn - staff writer

A patient-friendly hallmark in the health care industry has arrived at SSM Health St. Anthony Hospital - Midwest, said Debbie Pender, RN, chief nursing officer/VP patient care services. SSM Midwest went live with Epic on December 11.

SSM Midwest has brought on board Epic, a leading-edge electronic health records system to

streamline all areas of operation.

SSM has utilized the Epic technology platform since 2011 to seamlessly coordinate care without a paper trail.

Epic technology allows patients to have convenient digital access to their health

Recruiter Showcase

HIRING IN NORMAN Thursday, Feb. 3 and Thursday, March 3 A - 6 p.m. at the Norman Regional Hospital Education Center, 501 N. Porter Ave. in Norman. Applicants are encouraged to have their resumes ready as ar-the-spat interviews and offers may happen at these events. The next virtual event is from 4-5 p.m. Thurs, Jan. 27. SEE OUR AD IN THE CLASSIFIEDS. NormanRegional.com

www.oknursingtimes.com

OU Health to Participate in National Study of 'Long COVID' **QHealth**

OU Health is projected to receive more than \$1 million to participate in a National Institutes of Health (NIH) initiative to better understand the long-term effects of COVID-19 infection. Enrollment in the study begins soon, and researchers will follow participants for up to four years.

The NIH launched the RECOVER (Researching COVID to Enhance Recovery) Initiative to learn why some people have prolonged symptoms (often referred to as "long COVID") or develop new or returning symptoms after the acute phase of infection from SARS-CoV-2, the virus that causes COVID-19. The most common symptoms include pain, headaches, fatigue, "brain fog," shortness of breath, anxiety, depression, fever, chronic cough and sleep problems.

"This is a unique opportunity to be part of a nationwide study that investigates the impact of post-acute sequelae from SARS-CoV-2 infection (PASC), which includes long COVID. In other viral infections, you rarely see long-term symptoms at the rate we have seen with COVID-19. If we can understand the biological underpinning of these symptoms, that may help us to better treat people who continue to have problems for weeks or months after the infection is over," said Timothy VanWagoner, Ph.D., co-principal investigator of the study for OU Health.

VanWagoner is deputy director of the Oklahoma Clinical and Translational Science Institute (OCTSI) See COVID Page 2

EPIC Continued from Page 1

information. Documentation of the patient medical record is stored in the easy to access hospital computer system.

Epic is one of the most preferred platforms to document health records in the nation. The patient's entire encounter with SSM Midwest is secured, confidential, and easily accessible.

"Different departments can see that medical record," Pender said. "So, it really helps facilitate quality of care through ensuring continuity of the communication from department to department, even from the in-patient to the out-patient phase when physicians have Epic in their medical offices as well. So, that medical record goes wherever the patient goes in any hospital that has Epic."

Any patient discharged from SSM Midwest who somehow ends up in another hospital system using Epic will have their SSM record available to that hospital whether in Oklahoma or out of state. That whole record of care will go with that patient as a requirement of the Affordable Care Act. Hospitals for reimbursement purposes must come on board with an electronic medical record allowing portability of health care records from organization to organization.

"A patient's medical history and all the medications that they take travels with that patient which is very important for safe care," Pender continued. "There are some safeguards built within Epic that improve our patients' safety here."

The electronic medical record has been shown to prevent mistakes being made across the United States. Many elderly adults are known to take multiple medications. A lot of times they forget their medicine list, or they could have several doctors who have prescribed medicines as specialists. To avoid confusion, nurses can see all of a primary care physician's record from the computer. Physicians using Epic can update a patient's current medication list. Emergency rooms can easily access Epic records from a physician's office. The continuation of care is simplified.

"We are very excited to upgrade the technology at SSM Health St. Anthony Hospital - Midwest with Epic," said Dr. Kevin L. Lewis, President, SSM Health St. Anthony Hospital - Midwest & Regional President of SSM Health Medical Group Oklahoma. "We are committed to Midwest City and providing our patients with exceptional health care services."

Epic allows for safe IV infusions with medication administration with warnings implemented if guidelines are not followed properly.

"There's a lot of surveillance ability within Epic that tells us if a patient is having a stroke, if a patient perhaps has sepsis, and a lot of reports that we can get out of Epic that tell us about a patient's care experience from a quality/safety perspective," Pender said.

Several of the SSM Midwest



nurses have stated that the Epic implementation was the best go-live event they've ever experienced. Nurses commented that SSM was well prepared in bringing Epic to SSM Midwest.

"We are enjoying Epic here at Midwest, since it is so user friendly," said Joy Mathews, RN manager - CCU/PCU. "Documenting on one computer eliminates the need for paper, which is convenient in caring for our critically ill patients in the CCU. Additionally, it will be a huge tool for recruiting high quality nurses to our staff."

Pender serves as a team builder as the chief nursing officer at SSM Midwest. She has been CNO of SSM Midwest since June, after SSM purchased the hospital from Community Health Systems in April. Her goal has been to enhance the leadership structure from a for-profit hospital to a not-for-profit.

A lot of SSM Midwest nurses have used Epic in previous health care organizations they have

COVID Continued from Page 1

at the OU Health Sciences Center. The OCTSI unites universities, nonprofit organizations, American Indian communities, public agencies and primary care providers in research addressing the health outcomes of Oklahomans. OCTSI's existing infrastructure will be used to enroll patients from across the state, including those in rural and medically underserved areas. OU Health is among more than 30 academic healthcare institutions across the nation enrolling patients in the study.

OU Health will enroll approximately 80 adults in three different study categories. One group will include individuals with a past COVID-19 infection who continue to have symptoms. Another group will be comprised of people with a recent COVID-19 infection who may or may not continue to have symptoms. To serve as study controls, the final group will feature people who have never had COVID-19. Participants will be asked to undergo laboratory tests and other analyses, depending worked in. This was helpful in the transition.

"I have not met one person who thinks Epic was a bad thing," Pender said. "Now it's change, so they have to learn new work flows and the functionality within Epic, but everybody loves Epic."

She said it's nice to see seamless documentation utilized from department to department, all for the betterment of patient care.

"The care isn't just in a silo wherever you are in the hospital. A physician can see every piece of the record," Pender said. "It's been very positive."

The data analytics made available by Epic is phenomenal when evaluating best practices.

Safe and effective care is what patients deserve from any bedside nurse, Pender said.

For more information about SSM Health St. Anthony Hospital - Midwest visit:

http://www.ssmhealth.com/careers.

on the category.

Current data show that 10% to 30% of people who have had a serious COVID-19 infection will continue to experience symptoms for at least one month. Researchers don't know why symptoms persist long after the infection or why some people have little to no symptoms.

"The RECOVER study is important because researchers around the country will be sharing their findings in real time in an effort to find answers as quickly as possible," said Judith James, M.D., Ph.D., co-principal investigator of the study for OU Health and director of the OCTSI. "We hope to discover factors that put people at higher risk for 'long COVID', as well as protective factors. That information will be critical for preventing and treating the long-term effects of the virus."

The current study will focus solely on adults; however, a study in children and adolescents will be forthcoming.

For more information about enrolling in the OU Health study, call (405) 271-3490 or email osctr@ouhsc.edu.

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Steven and Christina Sibley are licensed, independent Insurance Brokers. Their focus is finding the best products to insure their client's Life, Health, Long Term Care and Medicare insurance needs are fully and affordably met, both now and in retirement. With her 20 years of healthcare experience and his 20 years of financial services experience, they are ready to offer you the information and personalized service you expect and deserve. There's never any pressure, or any charge, just help.





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FROM OUR FRIENDS AT

The Children's Center Employee Heartbeat -Head on...

At The Children's Center Rehabilitation Hospital, our employees truly are the heartbeat that drives the organization. Every day, through the care and service they provide, they live our mission of maximizing the potential of every child and exemplify our core values of compassion, integrity, excellence, service and stewardship. We hope you enjoy getting to know our amazing employees through our Heartbeat profiles.

How Human Resources professional, Molly Johnson, serves others through her career

What do you get when you combine a mind for business and a heart for helping others? HR Generalist -Benefits Specialist, Molly Johnson, has always had both, and she has taken a career journey following both her head and her heart to find the perfect fit at The Children's Center Rehabilitation Hospital.

After college, Molly worked in banking customer service, but banking didn't feel like the right industry. She moved to Florida to be closer to family and pursued a career as a flight attendant for three years. During that time, she met her husband and moved to Oklahoma to create a life with him and his three daughters. Her Oklahoma job search led her to Payroll and Human Resources Assistant positions with an automotive group, where she worked her way up to Benefits



Molly Johnson, HR Generalist -Benefits Specialist - The Children's Center Rehabilitation Hospital.

Coordinator and earned her PHR and SHRM-CP certifications. She knew she had found the career that felt right.

While Molly appreciated helping employees through HR, she felt a higher calling.

"I knew that I wanted a career that felt like a higher purpose and was helpful to the community in some way," she says. When she saw a job posting for the hospital,

she thought, "Although I'm not a medical person, I can be helpful to the employees who are called to care for sick kids." In her heart, she knew she had found the missing piece in her career.

"I want to do everything in my power to ensure that our employees are getting the best care and the best value in keeping themselves

See JOHNSON Page 5

More than 1 in 4 Oklahoma high schoolers say they have Vaped.



Help teens quit.

My Life, My Quit offers Oklahoma teens 13-17 FREE help to quit tobacco & vaping. Free services include live text, phone or web chat. Services are confidential and do not include patches, gum or lozenges.

To get started, teens can **text "Start my quit" to 36072.** Learn more at **MyLifeMyQuit.com.**

For patients over 18, the Oklahoma Tobacco Helpline offers proven tools to quit tobacco. Visit **OKhelpline.com/health-care-providers** to see how you can help your patients succeed.





JOHNSON Continued from Page 4

and their families healthy, especially in this pandemic, so they can continue to provide the best care for our patients," she shares. "I love when I find a new clause or stipulation that can really work to an employee's benefit!"

Molly has a full plate at work, handling all of the benefit plans, 401k, the administrative side of Worker's Compensation, and employee leaves of absence. She also manages the hospital's account for the YMCA, as well as the fitness



But Molly never forgets the reason she works so hard. "I love hearing good news from employees, which happens frequently during FMLA meetings with employees," she says. "We have a lot of expectant mothers at the hospital, and I am so excited for all of the new babies. I can't wait to see all of the pictures!" See FUN FACTS below



the children's center



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MOLLY'S FUN FACTS:

Hometown: Toledo, Ohio

Favorite hobbies/ways to spend free time: "Attending my twin stepdaughters' cheerleading and volleyball events, family time, getting out on the lake on our boat whenever we can."

Favorite food:

Mexican food and chocolate

Favorite inspirational quote:

"I actually have a box of over 700 inspirational quotes in my office that I change regularly. The two that really resonate with me are: 'With the new day comes new strength and new thoughts.' Eleanor Roosevelt, and 'Life is very interesting if you make mistakes.' Georges Carpentier. I tend to be pretty hard on myself and these remind me that it's okay to make mistakes and each day is a new day to try again."

How would you spend a dream weekend?

"On a beach or private island with my family and people I love – soaking up the sun and enjoying each other's company."

Something people might not know:

"We lost my oldest stepdaughter in a car accident on January 26, 2019. She was an organ donor and saved four lives through organ donation. We spent New Year's Day 2022 in Pasadena, CA where she was honored through a floragraph on the Donate Life float in the Parade of Roses. It was an emotional and amazing experience."

From the bucket list:

"Travel! Top spots include the pyramids in Egypt, the coast of Greece, Vatican City in Rome, Brazil, Jerusalem and Thailand, to name a few."

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Respiratory Care Practitioners have the potential to earn up to \$20,000 in a graduated sign-on bonus!

OU Health is the state's only Level 1 Trauma Center and serves as a comprehensive regional hub for traumarelated care available to people of all ages. We are an academic facility and promote a fast-paced environment that will allow your career to really take off. We have six clinical affiliate programs for Respiratory care and we welcome new graduates to our team, no experience necessary. Our graduated orientation process, from floor care to Trauma ED, will help ensure that you will find your confidence through a combination of developing critical thinking skills and peer support.

At OU Health you can expect to gain a host of specialized skills by rotating through our service line critical care areas, which include Trauma, ortho/surgical, cardiovascular, Neurosciences, transplant and medicine ICU's. We encourage and support our RTs to perform in specialty roles such as the COPD navigator, Daily assessor, Smoking cessation advocate, Diagnostic Bronchoscopy and we have staff that are part of the ECMO specialist team as well.

With our newly created career ladder and recently increased pay rates, now is a great time to join our team!

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Oklahoma careers.ouhealth.com Children's Hospital **Health Respiratory Care** Practitioners have the potential to earn up to \$20,000 in a graduated sign-on bonus!

Find a job you love at OU Health!

Oklahoma Children's Hospital is the state's premier institution for treating both pediatric and neonatal patients. We promote a fast-paced environment that will allow your career to really take off. Pediatric experience is not necessary as we welcome new graduates to our team. Our 12-week orientation process will help ensure that you will find your confidence through a combination of developing critical thinking skills and peer support.

At Oklahoma Children's you can also expect to gain a host of specialized skills in any one of our three focused areas. These areas include a 96-bed NICU where we care for extremely premature infants with high frequency ventilation and surfactant delivery. We have a recently renovated 34-bed PICU where the focus is to treat acutely ill infants and children. We have also expanded our CVICU to 25- beds where the focus is caring for patients with congenital heart defects. We encourage our RTs to join the ECMO team as well.

With our newly created career ladder and recently increased pay rates, now is a great time to join our team!

140 GENERAL NURSING

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We are Hiring a Medical Director/Psychiatrist to provide inpatient and outpatient services. St. Mary's Regional Medical Center, located at 305 S 5th St, Enid, OK 73701 is now hiring a Medical Director/ Psychiatrist to provide inpatient and outpatient services. Enjoy providing much-needed services in an attractive Midwestern location work while benefiting from the support of a progressive administrative team that values a strong work/life balance.

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140 GENERAL NURSING

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Physicians and Physician Assistant(s). They are responsible for adhering to all Standards of Nursing Practice, for managing supplies and equipment with the direction of the Clinic Physician Assistant and/or Physicians. Must have current Oklahoma LPN license and prior work experience in clinic setting.

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Calling all healers! We need you on our team. Norman Regional is hiring for both clinical and non-clinical positions.

In-person hiring events are the first Thursday of each month from 4 - 6 p.m. at the Norman Regional Hospital Education Center, 901 N. Porter Ave. in Norman.

Upcoming in-person events include:

Thursday, Feb. 3

at Norman Regional Hospital Education Center Thursday, March 3

at Norman Regional Hospital Education Center

Applicants are encouraged to have their resumes ready as on-the-spot interviews and offers may happen at these events. The system's unique virtual events allow job seekers to "shop" for a position among several departments and chat with leaders from across hospitals and clinics.

The next virtual event is from 4-6 p.m. Thurs, Jan. 27.

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Reps. Bice, Lucas visit OMRF

The Oklahoma Medical Research Foundation this week welcomed U.S. Reps. Stephanie Bice (OK-05) and Frank Lucas (OK-03) for updates on work at the Oklahoma City-based nonprofit biomedical research institute.

Bice and Lucas met with OMRF President Andrew S. Weyrich, Ph.D., and scientists from three of the foundation's research programs.

Bice received a briefing on Covid-19 research from OMRF Vice President of Clinical Affairs Judith James, M.D., Ph.D., who leads a team of scientists studying the body's immune response to Covid-19 and whether the virus may trigger autoimmune conditions such as lupus and rheumatoid arthritis. James is also the lead investigator on a nationwide National Institutes of Health-funded trial to assess how to elicit a stronger immune response to the Covid-19 vaccine in people with certain autoimmune diseases who did

The Oklahoma Medical Research not respond well to an original vaccine regimen.

"Federal funding for biomedical research is vital," said Bice, a member of the House Science, Space and Technology Committee. "I'm proud that OMRF is part of my district. The cutting-edge work scientists are doing here is inspiring and impacts not just Oklahomans, but all Americans."

Lucas met with OMRF researchers Michael Beckstead, Ph.D., who is studying the role of the naturally occurring brain chemical dopamine in opioid addiction, and Courtney Griffin, Ph.D., whose work on blood vessels shows promise for restoring vision in those who have lost eyesight due to diabetes or premature birth.

A champion of ensuring rural students get access to quality science, technology, engineering and math education to bolster their career opportunities, Lucas applauded OMRF's efforts to train the next generation of scientists through in-state recruitment as well as in the foundation's Fleming Scholar Program and Langston University Biomedical Research Scholars Program.

"Basic research like what scientists are doing at See OMRF page 13



U.S. Rep. Frank Lucas (OK-03) visited the Oklahoma Medical Research Foundation for an update on work at the Oklahoma City-based nonprofit biomedical research institute. From left, OMRF President Andrew S. Weyrich, Ph.D., Rep. Lucas.



The AARP Foundation Senior Community Service and Employment Program (SCSEP) can help you keep pace with the changing nature of work and improve your ability to find employment, even in today's tough job market. AARP Foundation SCSEP places older workers in a variety of community service activities at nonprofit and public facilities like day care and senior centers, schools and hospitals. As a participant, you can sharpen your job skills and earn income — all while giving back to your community.

If you're 55 or over and unemployed, contact AARP Foundation SCSEP's local office at 405.879.3899 for more information.





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OMRF Continued from Page 8

OMRF is fundamental to advances in human health, but it requires a strong STEM workforce," said Lucas, the ranking member of the House Science, Space, and Technology Committee. "OMRF plays an important role in making careers in STEM a reality for Oklahomans."

OMRF, which is celebrating its 75th anniversary, has nearly 500 staff members and scientists in more than 50 labs studying cancer, heart disease, autoimmune disorders, and diseases of aging. The foundation's discoveries have yielded hundreds of patents and three life-saving drugs available in hospitals and clinics worldwide. Most recently, Adakveo became the first targeted therapy approved in the U.S. for sickle cell disease, which affects an estimated 100,000 Americans.

"The Oklahoma congressional delegation's commitment to biomedical research is steadfast and admirable," said Weyrich. "Their decades of support for OMRF's scientists and our mission of making discoveries that make a difference has changed and saved lives."

Protecting the Vulnerable from Financial Exploitation

Every year many elderly and vulnerable adults become victims of financial exploitation. Financial exploitation is defined as illegal or improper use, control, or withholding of property, income, or resources.

Many people fall victim to financial exploitation at the hands of both strangers and family. This crime is a felony under Oklahoma law. Penalties include jail time, thousands of dollars in fines, and restitution.

Signs of financial exploitation can include, but are not limited to the following:

• Unusual bank activity • Change of statement delivery address • Unpaid bills • Unexplained withdrawals or transfers • Large purchases that don't fit the persons income level

How to protect against financial exploitation: • Estate planning • Choose a Power of Attorney ahead of time • Consult an Elder Law Attorney If you or someone you know are experiencing financial exploitation contact Adult Protective Services (APS). 800-522-3511 or okhotline.org

The Long-Term Care Ombudsman Program is in place to advocate for elderly Oklahomans who reside in Long Term Care facilities. As our aging population grows, so does the need to make sure our loved ones are being cared for. If you have question or concerns regarding Resident's Rights in a long term care facility there are several ways to contact an Areawide Aging Agency Ombudsman. Call 405-942-8500 to speak to an Ombudsman Supervisor, visit the agency website at www.areawideaging.org, or find us on Facebook.





Areawide Aging Agency



U.S. Rep. Stephanie Bice (OK-05) visited the Oklahoma Medical Research Foundation for an update on work at the Oklahoma City-based nonprofit biomedical research institute. From left, OMRF President Andrew S. Weyrich, Ph.D., Rep.

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- Alexis, RN

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HillcrestHealthCareSystemJobs.com

(AS PUBLISHED IN THE 2021 EDUCATION GUIDE TO NURSING)

O pportunities in nursing are seemingly endless, but it's rare one employer can offer as much to advance a nurse's career as Hillcrest HealthCare System.

The opportunity to provide exceptional patient care in a progressive environment in multiple specialties across multiple campuses exists within Hillcrest.

Melissa Trujillo, director of talent acquisition, says nurses can find it all with Hillcrest HealthCare System.

"I feel like 90 percent of our movement is internal transfers," Trujillo said. "I think it's the progression of our facility makeup. We have facilities that have less than 50 beds and all the way up to more than 650 beds. They all have unique specialties and cases they can handle.

"It gives you a career track, basically."

Serving communities throughout eastern Oklahoma, Hillcrest HealthCare System (HHS) includes Hillcrest Medical Center, Hillcrest Hospital South, Oklahoma Heart Institute, Bailey Medical Center, Hillcrest Hospital Claremore, Hillcrest Hospital Cushing, Hillcrest Hospital Henryetta, Hillcrest Hospital Pryor, Tulsa Spine & Specialty Hospital and Utica Park Clinic.

Across its hospitals and health care facilities, HHS offers 1,143 beds and employs a team of more than 6,500.

Eight facilities and two physician practice groups offer a multitude of opportunities for nurses.

"I think as an HR group we

Opportunity abounds at Hillcrest

Hillcrest HealthCare System nurses like Emily Hammett, RN, have an array of choices to take their career within Hillcrest.

offer a tailor to your skillset and a tailor to your liking. We are a place that promotes transferring from within," Trujillo said.

Not only are nurses able to transfer within facilities but being owned by Ardent Health Services allows nurses to transfer to other states.

Whether it be facilities in Texas or New Mexico or along the East coast the options are there.

"We really offer internal mobility," Trujillo said. "If they were to transfer here to New Mexico they would keep their PTO and their years of service. I would say we pride ourselves on internal mobility because we would rather that RNs stays in our system."

"We have lots of opportunities within the system for movement and exposure."

Hillcrest Medical Center, 1120 S Utica Ave., employs nearly 2,500 in multiple units. Hillcrest Hospital South, 8801 S 101st E Ave., staffs nearly 1,000.

Hillcrest South offers a nursing residency program for those

graduating in the spring.

"You enter the program, get exposure to multiple units and once you're out of the program then you're well-equipped to go into whatever unit you desire," Trujillo said. "What we're really hoping is they get exposure to units they may think they would not be interested in."

Trujillo points to Hillcrest's medical/surgical units that have an added specialty such as trauma or ortho.

"To me, you don't know what you don't know," Trujillo said. "And since it's temporary and a residency program you're getting that exposure and moving on to the next one. You might have an experience that resonates with you and persuades you to go to the less popular unit just because you're finding out what your niche is."

Hillcrest also offers up to \$2,500 per semester in tuition reimbursement for career advancement. Relocation and sign-on bonuses are also available for new grads.

"Not a lot of facilities in the area offer both of those things for a new grad," Trujillo said.

The system is a large one but time and attention is spent on onboarding new hires and making sure they feel comfortable.

"We've put a lot of time and effort into it to make sure the new grad feels safe. It's a lot of detailoriented training," Trujillo said. "I think we've narrowed down the reasons why nurses quit, leave or leave the profession all together is because they don't feel adequately trained enough to do their job or they feel unsafe.

"I think a lot of our programs are focused around making that new grad feel safe but yet giving them the exposure and skills that they need to be successful on down the road as an RN." For more information visit: https:// hillcrestmedicalcenter.com/



NEW SURVEY DATA: Racism Within the Nursing Profession is a Substantial Problem

According to the findings of a new, national survey of nurses by the National Commission to Address Racism in Nursing (the Commission), nearly half reported that there is widespread racism in nursing, demonstrating a substantial problem within the profession. Comprised of leading nursing organizations, the Commission examines the issue of racism within nursing nationwide and describes the impact on nurses, patients, communities, and health care systems to motivate all nurses to confront systemic racism. Integrity calls on the profession and nurses to reflect on two realities, one as the most trusted profession while also being a product of our environment

and culture. It is necessary to work toward connecting these two realities.

"My colleagues and I braced ourselves for these findings. Still, we are disturbed, triggered, and unsettled by the glaring data and heartbroken by the personal accounts of nurses," said Commission Co-Lead and American Nurses Association (ANA) President Ernest J. Grant, PhD, RN, FAAN. "We are even more motivated and committed to doing this important work justice. Racism and those individuals who do not commit to changing their ways but continue to commit racist acts have absolutely no place in the nursing profession."



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According to more than 5,600 survey respondents, racist acts are principally perpetrated by colleagues and those in positions of power. Over half (63%) of nurses surveyed say that they have personally experienced an act of racism in the workplace with the transgressors being either a peer (66%) or a manager or supervisor (60%).

Superiority continues to surface as a primary driver from nurses representing predominantly white groups along with nurses who are advantaged and privileged by unfair structural and systemic practices. These survey findings move beyond the rhetoric to the reality and should serve as a call-to-action for all nurses to confront racism in the profession.

"Structural and systemic practices that allow the racist behaviors of leaders to continue to go unaddressed must be dismantled," said Commission Co-lead and National Black Nurses Association (NBNA) President and CEO Martha A. Dawson, DNP, RN, FACHE. "As clichй as it sounds, it starts at the top. Leaders must be accountable for their own actions, set an example for their teams and create safe work environments where there is zero-tolerance for racists attitudes, actions, behaviors, and processes. Leaders must also create a climate that gives permission and support to dismantle institutional policies and procedures that underpin practice inequities and inequalities."

Of those nurses who report that they have witnessed an act of racism in the workplace, 81% say it was directed towards a peer. Nurses say that they have challenged racist treatment in the workplace (57%), but over half (64%) said that their efforts resulted in no change.

"Nurses are ethically and professionally obligated to be allies and to speak up against racism, discrimination, and injustice for our

patients and fellow nurses," said Commission Co-Lead and National Coalition of Ethnic Minority Nurse Associations (NCEMNA) President Debra A. Toney, PhD, RN, FAAN. "Civil rights and social movements throughout history offer the blueprint, which demonstrates that diligent allyship is key to progress. To the nurses that challenge racism in the workplace, do not get dismayed by inaction, but continue to raise your voice and be a change agent for good."

Many respondents across the Hispanic (69%) and Asian (73%) populations as well as other communities of color (74%) reported that they have personally experienced the racism in workplace. Overwhelmingly, the survey findings indicate that Black nurses are more likely to both personally experience and confront acts of racism. Most Black nurses who responded (72%) say that there is a lot of racism in nursing compared to 29% of white nurse respondents. The majority (92%) of Black respondents have personally experienced racism in the workplace from their leaders (70%), peers (66%) and the patients in their care (68%). Over three-fourths of Black nurses surveyed expressed that racism in the workplace has negatively impacted their professional well-being.

"The acts of exclusion, incivility, disrespect and denial of professional opportunities that our nurses have reported through this survey, especially our Black, Hispanic and Asian nurses, is unacceptable," said Commission Co-lead and National Association of Hispanic Nurses (NAHN) President Adrianna Nava, PhD, MPA, MSN, RN. "Racism is a trauma that leaves a lasting impact on a person's mental, spiritual, and physical health as well as their

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overall quality of life. As the largest health care workforce in the country, we must come together to address racism in nursing as the health of our nation depends on the health and well-being of our nurses."

Since its inception in January of 2021, the Commission has been intentional and bold in leading a national discussion to address racism in nursing. The Commission has convened listening sessions with Black, Indigenous, and People of Color (BIPOC) nurses and hosted a virtual summit focused on activism with foremost subject matter experts. Collaborating with top scholars on the issue, the Commission developed a new definition of racism to establish a baseline for holding conversations, reflecting on individual or collective behaviors, and setting a foundation for the work ahead.

"The collective voices and experiences of BIPOC nurses nationally have provided a call for overdue accountability within the nursing profession to acknowledge and address the structural racism rooted within nursing, especially policies that have anti-Black and anti-Indigenous histories," said Commission Co-lead and Member-at-Large Daniela Vargas, MSN, MPH, MA-Bioethics, RN, PHN. "The next generation of BIPOC nurses deserve more than performative activism and empty words that continue to yield no progress toward structural changes within the nursing profession or racial equity. The breadth of the nursing profession through



National Commission to Address Racism in Nursing

the Code of Ethics for Nurses holds all nurses accountable for calling out racism and replacing racist policies rooted in white supremacy with ethical and just policies that promote and implement accountability, equity, and justice for nurses and the communities that we serve."

Nursing's challenges with the issue of racism are reflective of the larger society. As a profession, we need to confront these same challenges with racial inequities within the profession. As such, the Commission's work is urgent to create safe and liberating environments for all nurses so that the profession exemplifies inclusivity, diversity, and equity. The Commission urges all nurses across every health care setting and environment to join us in boldly confronting systemic racism. We must address upstream sources of racism in order to build sustained safe and effective environments of optimal care delivery ideal for every nurse and every patient regardless of race, origin or background. Nurses can learn more and share a story of experiencing racism or being an ally for change today.

*Data was collected through a survey administered by the National Commission to Address Racism in Nursing Between October 7-31, 2021, 5,623 nurses completed this survey. *



Situation Update: COVID-19

COVID-19 Cases	944,461
New Cases	13,428*
New Cases 7 day Average	11,151
Active Cases	121,621
CDC/NCHS Provisional Deaths	13,129
Acute Care OSDH Licensed Facilities/Location**	Recent 3 day Ave. Hospitalizations
	Cases (ICU)
Region 1 (NW)	80 (19)
Region 2 (NE)	127 (27)
Region 3 (SW)	245 (35)
Region 4 (EC)	115 (23)
Region 5 (SE)	83 (11)
Region 6 (Central)	169 (30)
Region 7 (Tulsa)	525 (105)
Region 8 (OKC)	561 (105)
Total	1905* (355)
Other Types of Facilities	
Focus Facilities	107 (30)
Rehabilitation Facilities	2 (0)
Tribal Facilities	55 (5)
Other Facilities Total	165 (35)

 * 2,000 of these cases were delayed in being reported to OSDH and are more than 14 days old

*Includes 58 hospitalizations in pediatric beds.

Focus, Rehabilitation and Tribal Facilities numbers are not assigned to a specific region as their patient populations reside across the state. Information provided through survey of Oklahoma hospitals as reported to HHS as of the time of this report. Response rate affects data. Facilities may update previously reported information as necessary. Data Source: Acute Disease Service, Oklahoma State Department of Health. *As of 2022-01-27 at 7:00 a.m.**

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