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May 2, 2022 Vol. 23 Issue 17 Information for the Oklahoma Nursing & Health Care Professional

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Opportunity! Evening Nurse Manager Position See our ad in the classifieds!



Jodi Turpin, RN, health care director at Legend at Rivendell assisted living is an encouraging voice among the staff and residents.

Jodi Turpin has learned a lot about endurance and commitment during her nursing career at Legend at Rivendell, located in Oklahoma City.

"I guess I've learned that I'm stronger than what gets things done. I thought," said Turpin, RN, health care director.

"Working somewhere else, there was always someone who was above me in whatever position story and photo by James Coburn, Staff Writer

that I was in," she said.

As a health care director, she has found she is able to serve others with confidence. She

Turpin began her nursing career a year after graduating from Redlands Community College in El Reno in 2000. She is well

experienced as a nurse, having worked on a hospital medical surgical unit and dialysis before transitioning to assisted living at Legend at Rivendell.

She had a couple of strong nurses mentor her in the hospital. She learned a lot about best practices by having nurses who were always there if she had a

TURPIN Continued from Page 1

question to ask.

Today, Turpin learns something new every day and does her best to encourage the nursing staff. She teaches new nurses how to implement the knowledge they are taught in school. Her days allow her to get to know the residents well. They teach her about history through the decades.

Several of the men living at the Legend at Rivendell served in the military from World War II, Korea to Vietnam. One of them was an engineer who rode in the helicopters to evacuate soldiers and Marines in Vietnam.

"It's amazing to hear their stories and how they survived and how they grew up. That's one of my favorite parts. I just like getting to know the residents, hearing their stories and taking care of them," she said. "It's really unlike any other nursing job I've ever had. I come here five days a week. You bring them in and you just become family." A life enrichment coordinator plans special activities for the residents. Many of them are interested in health, so they were given a recent presentation about nutrition. For instance, grapes help rejuvenate skin cells.

"There's a lot of learning activities. There's Bingo and puzzles. They can go on trips outside like Walmart or go around the lake for a little drive," she continued.

Turpin said she admires the compassion that the nursing staff has for the residents by going above and beyond every day. Nurses and aides will go to Braum's Dairy to get shakes for the residents by request. It's one of their favorite treats, she said.

"They go to the store for them. You can really see how much they care and enjoy their job," Turpin added.

In addition to assisted living, the Legend at Rivendell offers a 15-apartment neighborhood connected to the facility where an LPN is there 24 hours a day offering more assistance.

"If they need two-person assist

transfers for higher medical needs, we move them into that neighborhood," Turpin said. "It's kind of an in-between to skilled nursing. It's not a skilled, but it's that next step."

While some of the residents she has known have lived there for five years, only two or three years is the average time that residents live in assisted living at Legend at Rivendell, she said, Turpin said. She gets to enjoy the residents' company as the age in place.

"Being in the field that we're in, eventually they are going to decline to where they pass," she explained. "To be able to go through all that aspect with them and the family, and then to hear they were so very grateful that they mention us at the service or come up and they give you a hug because all the care you've given them - it has meaning," she explained. "I feel like I have something meaningful every day when I go home because of the work that we do. But to know the family really appreciated all the love and care that was given, that means a lot to me."

Turpin said she has always wanted to take care of people in need. Her leadership, set by example, inspires more people to become nurses or to continue in their careers. Nurses with longevity have a thick skin, she explained. Physicians give the orders for their patients, but the nurse is there as the front-line worker.

"You're implementing them. You have a lot coming at you. It just takes a strong-minded person to be able to take on all of the stress of the day because there's not a day when there is something going on," she said. "It's something new every day. Just a strong mind and character. You're going to really have to stand up for yourself, stand up for your patients, your residents because you're the one that has the medical knowledge. You're the one who needs to stand up for them because they won't be able to do it themselves."





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Report Shows Devastating Number Of Nursing Home Closures

American Health Care Association and National Center for Assisted Living (AHCA/NCAL) released a report last week highlighting the growing number of nursing home closures. More than 1,000 nursing homes have closed since 2015, displacing as many as 45,000 vulnerable residents. As nursing homes and assisted living communities struggle with the lingering effects of the COVID-19 pandemic and a lack of sustainable government funding, AHCA/NCAL projects that hundreds of additional closures are imminent.

AHCA/NCAL report includes:

• Since 2015, facility closures have included 776 before the pandemic and 327 during the pandemic.

• Over 400 nursing homes may close before the end of this year.

• During the pandemic, nearly

(46 percent) were facilities with the highest ratings by the federal government.

The findings from the report have been covered by several local and trade outlets, including McKnight's Long-Term Care News, Skilled Nursing News, Provider Magazine, Becker's Hospital Review, The Highland County Press and The Altamont Regional Enterprise.

In response to the findings from the report, Mark Parkinson, president and CEO of AHCA/NCAL, said:

"Every closure is like a family Additional key data from the being broken apart, with the lives of residents, staff and their families impacted in the process. With hundreds of nursing home closures looming now and thousands more anticipated if government funding is cut, state and federal policymakers need to step up to support our social safety net. We need to do better than just keep nursing home doors

In case you missed it, the half of nursing home closures open-we need to make significant investments to better support our frontline caregivers and transform facilities for a growing elderly population."

In many cases, facilities are faced with the difficult choice of limiting admissions or closing their doors for good as a result of financial challenges and a historic workforce shortage. Earlier this month, the Eliza Bryant nursing home in Ohio announced its impending closure because of financial and staffing troubles, and the Kensington, a nursing home in Nebraska made a similar announcement a week later.

Nursing home closures mean reduced access to care for vulnerable seniors who need around-the-clock care. Policymakers must act by allocating the resources necessary to address this urgent crisis and support long term care for the future.

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CAREERS IN NURSING EXTENDING LIVING AND PEACE OF MIND by James Coburn - staff writer

Connie McMillan became a registered nurse out of her love for people in need. She recognized the importance of sustaining one's health while serving in various fields of nursing.

"There's been a little bit of a personal thing with everything that I've done," said McMillan, who serves as a case manager for All Faith Home Care, located in Edmond. "And it's touched my life and my family's life in every aspect of my career. For me it's just an extension of my faith in being able to be the hands and feet and loving on people when caring for them."

Compassion is an intrinsic value in every part of her life. And it wouldn't change a bit even if she was not a nurse. Managing disease processes in the home is paramount in preventing a patient from being hospitalized or going to an emergency room, she said.

"We put out the fire before it

ever gets started by managing the care of their clients quickly. when going in their homes with them. If we can manage at home to help them, it seems to extend their life and their enjoyment to life and quality of life," McMillan said. "It allows them to maintain their residence in the community among their family and friends."

It can be difficult to get into a physician's office on a timely basis. For that reason, home health is the go-between, serving as an extension of care for a physician in the patient's home, McMillan said. A patient's condition and symptoms are closely monitored. Any disparity is reported promptly to the patient's physician.

The independent nursing staff at All Faith Home Care in Edmond works cohesively as a team, McMillan said. They are often alone in the field with little back-up, unless it comes by telephone, she said. So, the nurses have a lot of autonomy to think on their feet while managing the home health

"That's the enjoyable part of it for me. The people that I work with are great support and understanding, and that's important to me in the nursing field," McMillan said. "It's a very aggressive field and it's important to have people that are there with you and understand the difficulty of the task at hand out in the field, also,"

The education and time All Faith offers their clients is developed by trust. Nurses have a one-on-one relationship with their patients, allowing them to see things in the home that a physician does not observe.

"They can't understand what's keeping this stirred up," McMillan said. "So, I think that's the benefit of it."

All Faith Home Care also relieves the anxiety of family members who may live across town or in another city or state. The relationship between families and nurses is vital, making the nursing team an extension of the

family.

"That becomes integral in the whole process of keeping it managed well," McMillan said.

She became a nurse in 1998 after graduating from nursing school in Charleston, SC. Thereafter, McMillan left West Virginia for Oklahoma four years later and has focused on home health since coming here. She worked for another home health company for two years before serving at All Faith Home Care where she brought her skills as a well-seasoned nurse to Edmond. She recalled beginning her nursing career by serving in labor and delivery. She worked with young families by delivering babies for 15 years.

A need to minister to teenage mothers sparked her interest in nursing. She taught birthing and parenting classes.

Emergency rooms and med/surg was her next venture. She also did risk

See McMillan Page 5



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McMillan Continued from Page 4

management for hospitals.

Years have passed, but one thing has remained. McMillan knows she is appreciated by the family and patients she serves. A thank you means a lot.

"It happens not so often. I think they just know that's who we are," she said. "And it becomes one of those things that they just trust and understand it's part of what we do. So, that thank you sometimes surprises them and us. It just comes up from the heart. It's an emotional response to having people they know really care, and that they can count on and trust to be there for them."

Some of their patients are young. McMillan has patients in their 20s and 90s. They all have different physical needs. Some require assistance with bathing and dressing and some don't. Home health aides will come to the home to help them with those needs. But many patients simply require a visit by a nurse.

Michael Boensch, RN, said the elder patients "truly provide people lessons for today for what they have gone through, which is rather unique. They are just a very resilient people. I just like going to see them."



Connie McMillan, RN, draws from a deep well of observation, faith, and empathy in her role as a case manager for All Faith Home Care, located in Edmond.



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Index to Classifieds

Carsar Opportunities

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May 2, 2022

We are seeking Director of Clinical Services/Director of Nursing

Education: RN - Must possess, as a minimum, a Nursing Degree from an accredited college or university. Exp: Must have, as a min, 3 years of experience as a supervisor in a hospital, nursing care facility, or other related health care facility. Must have, as a minimum six months experience in rehabilitative & restorative nursing practices. North County Nursing and Rehab. 2300 W Broadway St, Collinsville, OK 74021



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Purcell Municipal Hospital located at 1500 N Green Ave, Purcell, OK 73080 is in need of a PRN, or as needed, Clinic Nurse/LPN for the after hours / urgent care clinic. Monday-Friday 8a-7p, varied weekends: Saturday 10a-6p, Sunday 10a-4p. No holidays.

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Oklahoma's Nursing Times

May 2, 2022

What do you admire about senior adults?



AllFaith Home Care



"I think it is their wisdom and

their ability to relax in all the

just teach me so much."

situations that they have. They

Connie McMillan, RN





Michael Boensch, RN





Kathy Howard, LPN



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Our daughter, Ellie, was born in November 2008. When she was 3 months old, we found out she had a liver problem. We went to Children's Hospital in OKC, but were soon sent to a transplant center in Nebraska for evaluation. On March 18th, Ellie was put on the list for transplant. We came back home to wait. Ellie was treated at Children's twice a week, until she began to lose weight in May. We went back to Nebraska the day after Mother's Day, and she was admitted to the hospital. While there, I was evaluated as a living donor for Ellie, and we soon learned I could give her part of my liver. Ellie's transplant was on May 22, 2009. It was the hardest thing that I've ever done, but the

easiest decision of my life. We came home Father's Day weekend.

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LifeShare



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OCU continues to lead

Long regarded as one of the top nursing programs in the state, Oklahoma City University's Kramer School of Nursing will expand its offerings this fall, offering two fully online options for the Master of Science in Nursing and RN-BSN programs.

"We recognize that postlicensure nurses may need or desire more flexibility and convenience when returning to school to obtain a higher degree," said Dr. Gina Crawford, Interim Dean, OCU Kramer School of Nursing and the College of Health Professions. "We believe our online options will allow for a greater number of nurses to advance their education in a way that best fits their needs and busy schedules. While being more convenient, the quality of our programs and the dedication of our faculty continues to be nothing less than outstanding."

The MSN program at Kramer School of Nursing provides students with the opportunity to obtain a Master's Degree focused on Education or Leadership. The program is 33 credit hours offered in the spring, summer, and fall.

The majority of students complete the program in five semesters while maintaining fulltime employment. The MSN program is intentionally designed to support the needs of the adult learner and will be offered completely online starting in the Fall of 2022.

"To me, what makes Kramer so unique is the authentic, caring relationships among faculty, staff, and students. It creates an environment where true learning can occur, and students thrive. In turn, we see this positively affect patient outcomes and advance the discipline," said Vanessa Wright, PhD, MSN, RN, Chair of Graduate Education.

The RN-BSN track is designed for working nurses to attain their BSN. It is 30 credit hours, 18 credit hours in nursing, and 12 general education electives.

"We are proud the of relationships formed between RN-BSN faculty and students and we look forward to continuing those relationships within the fully online platform. We will continue to offer an in-person option for nurses who prefer in-person instruction," said Professor Pam Tucker, Chair, RN-BSN. "The RN-BSN faculty are supportive and accessible to the students. We recognize the students as adult learners and value the experience each student brings with them to the RN-BSN track. Being part of the journey as RNs achieve their goals is an honor."

RN-BSN alumna, Connie Benhmida, RN stated, "I have been a professional nurse for 21 years and my lifelong goal of earning my BSN seemed out of reach. I discovered the opportunity to achieve my dreams by attending OCU KSN's RN-BSN program. The professors and staff at KSN understand the unique challenges that working adults encounter when deciding to return to school. My nursing instructors embraced me, encouraged me, and celebrated my achievements."

Those seeking a terminal degree are well-served at OCU.

The PhD degree prepares expert nurses in nursing education, research, and leadership to serve the community, state, and nation. The PhD program combines



educational delivery methods, allowing students to keep fulltime jobs and live in their own communities. Through hybrid course design, students meet on campus for 2-3 days at the beginning of each semester and complete courses online over the remainder of the semester. The program requires 57 post-master's credit hours.

The DNP program at KSN provides a blend of in-person instruction and distance education. The BSN-DNP program tracks include family nurse practitioner (FNP), adult-gerontology acute care (AGACNP), and psychiatric mental health nurse practitioner (PMHNP). All three tracks are also offered as post-master certificates (PMC).

DNP-Completion options are also available for MSN-prepared nurses seeking a terminal degree. "Faculty and staff are very proud of the quality, collaborative care provided by our graduates to their communities," said Dr. Cene' Livingston, Interim Chair of

"I am very grateful to take part in OCU's first PMHNP postmaster class," said student Dyanna Johnston (PMC PMHNP)." This program allows me to work fulltime and receive quality education from experienced instructors."

BSN-DNP alum Christin Tomlinson, FNP, echoed that sentiment.

"I highly recommend the program to anyone seeking a graduate nursing degree," she said. "The professors helped me understand the material, secure clinical placement and were always available for a kind word of encouragement."

OCU Kramer School of Nursing invites you to visit their upcoming College of Health Professions Open House on June 28 at OCU.

Virtual information sessions are also available on May 10 and July 12. Application deadline for the PMC PMHNP track is April 1.

You can find more information online at www.okcu.edu/nursing

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New Survey Findings Describe Nurses' Values and Perspectives on Medical Aid in Dying

Today, the American Nurses Association's Center For Ethics and Human Rights and the University of California, San Diego Health released the results from two new comprehensive studies of more than 2,374 nurses in the United States on Medical Aid in Dying (MAiD). Both qualitative and quantitative responses explore and describe nurses' values, perceptions, and perspectives on MAiD. Nurse respondents report a need and desire for more guidance on the expectations of their role in MAiD to provide competent and quality care where it is legalized.

Key findings from the quantitative study published in the Journal of Hospice and Palliative Nursing:

• 86% of nurses would care for a patient contemplating MAiD

• 67% of nurses would care for a patient in the final act of MAiD

• 57% of nurses support MAiD in the context of their professional role as a nurse

• 49% of nurses personally support MAiD

• 38% of nurses believe a patient should be the only one to self-administer life-ending medications

• 49% of nurses believe MAiD should be allowed by advance directive

• Nurses were more likely to support the concept of MAiD if they felt knowledgeable about MAiD

• Nurses who described themselves as spiritual were more likely to support MAiD than those who described themselves as religious.

Key findings from the qualitative study published in the

Nursing Ethics Journal, center around four major values ranging from the nurses' responses:

- Honoring Patient Autonomy Without Judgment
 - Honoring with Limitations
 - Not Until
 - Adamantly Against

MAiD continues to be a serious, yet misunderstood topic among the public, nurses, other health care professionals, and policymakers. Nurses must receive and have access to education regarding their role in MAiD. MAiD is currently legal in 10 states plus Washington D.C. and legislation is currently pending in additional states like Connecticut, Arizona, and Massachusetts. Nurses must be able to confidently respond to a patient's request for MAiD and care for patients competently within the legally and defined scope of their practice. Nurses are encouraged to participate in policy discussions as the practice becomes increasingly legal. Careful construction of institutional policy/standards is needed to minimize conflict, moral distress, and psychological harm amongst nurses.

In 2019, the American Nurses Association (ANA) released a position statement, The Nurse's Role When a Patient Requests Medical Aid in Dying, which aims to address the growing ethical questions and challenges that nurses face when responding to a patient's request for MAiD. While nurses are still ethically prohibited from administering aidin-dying medication, ANA advises nurses to remain objective when patients are exploring end-of-life options.

Situation Update: COVID-19

A	
New Cases 7 Day Average	98
New Cases Week of 4/17/22 - 4/23/22	686
Active Cases	1,292
Total Cases	1,039,953
CDC/NCHS Provisional Deaths	15,897
Acute Care OSDH Licensed Facilities/Location**	Recent 3 day Ave. Hospitalizations
	Cases (ICU)
Region 1 (NW)	0 (0)
Region 2 (NE)	1 (0)
Region 3 (SW)	5 (0)
Region 4 (EC)	5 (4)
Region 5 (SE)	0 (0)
Region 6 (Central)	8 (1)
Region 7 (Tulsa)	15 (6)
Region 8 (OKC)	38 (5)
Total	72* (16)
Other Types of Facilities	
Focus Facilities	1 (0)
Rehabilitation Facilities	2 (0)
Tribal Facilities	1 (0)
Other Facilities Total	4 (0)

*Includes 23 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 2022-04-28 at 7:00 a.m.

OMRF scientists pinpoint brain cells linked to drug abuse

New findings from scientists at the Oklahoma Medical Research Foundation could clarify a lingering mystery about chemical changes in the brain that occur during stress-induced drug abuse relapse of methamphetamine and cocaine.

Research led by Mike Beckstead, Ph.D., verified his theory about the chemical involved with relapse and the type of brain cells that interact with this chemical. The findings redefine the role certain brain cells play in addiction.

"This may be a missing piece in understanding how increased dopamine activity leads to addictive behavior, particularly after a period of abstinence," said Beckstead, who holds OMRF's Hille Family Foundation Chair in Neurodegenerative Disease Research.

Dopamine is a naturally occurring brain chemical that sends messages between specific neurons. Scientists have known for two decades that dopamine neurons are a convergence point between stress and relapse. Since that discovery, researchers have tried to identify how stress causes changes at the cellular level, with most studies focusing on a chemical receptor called CRF1.

"It was once believed that blocking CRF1 receptors in the brain could be used to reduce relapse in people with addiction, but those theories didn't pan out in humans," Beckstead said.

Beckstead went a different route in research with his wife and collaborator, Amanda Sharpe, Ph.D., an assistant professor at the University of Oklahoma School of Pharmacy. While working in separate labs in San Antonio before Beckstead joined OMRF, the pair found that responsibility may lie with a different receptor in the brain, CRF2. "These receptors weren't only on the neurons but also on supporting cells called astrocytes," Beckstead said.

He described astrocytes as the filler of your brain, taking up as much as one-third of all brain matter. They encase synapses and keep neurons functioning properly.

Beckstead and Sharpe theorize that activation of CRF2 receptors on astrocytes may trigger stress-induced relapse rather than CRF1 receptors on neurons.

Other experts remain skeptical of their hypothesis, so the couple's most recent study visualized the changes through samples from research models. They partnered with OMRF scientist Bill Freeman, Ph.D., whose lab houses sophisticated technology to sort cells using magnets and fluorescent markers.

This technique allowed researchers to isolate astrocytes and visualize CRF2 multiplying as cocaine or methamphetamine was administered to the research models.

"Astrocytes were thought for a long time to be bystander cells. Now we know they participate in chemical transmission," Beckstead said. "More study is needed, but these findings may reveal these cells as new targets for treating certain populations of people with addiction."

The study's findings were published in the journal Addiction Biology. This research was supported by National Institutes of Health grant Nos. R01DA032701, R01AG052606, R01AG059430 and I01BX003906, and funding from the NIH Centers of Biomedical Research Excellence and the Presbyterian Health Foundation.



Oklahoma Medical Research Foundation scientist Mike Beckstead, Ph.D.



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