Joe Catalano

Although I am writing this before the 2015 Convention, I want to thank all of you who attended and I know you had a great time! Also, since this is the last issue before Christmas, I want to wish all our members a very Merry Christmas and a Happy and productive New Year.

As that great and often quoted author, Anonymous, once said: “As you make your mark on the world, watch out for the guys with erasers!” The major take away from this saying is to make sure you are NOT one of the guys (or gals) with an eraser. As you are aware, over the past several years whenever we, the nursing profession in Oklahoma, have attempted to advance our practice through legislative action, the guys with the erasers turned out to be the ideologs who have overpopulated the Oklahoma Legislature. This hasn’t stopped us from trying and that’s a good thing. Sometime times you have to ram a brick wall several times before it will crack and fall down!

For the 2016 Oklahoma Legislative session, the Advanced Oklahoma Nurse Practitioners’ (AONP) Executive Board has made the commitment to push for full practice authority. The plan is to file officially during the legislative filing period this fall (2015) to be ready for the 2016 legislative session that begins February 1, 2016. Generally, bills filed after the official fall filing date do not even get considered.

You might be thinking: “Well, I’m not an advanced practice nurse, why should this matter to me?” The fact is that the majority of Oklahoma RNs are NOT advanced practice nurses, however, a rising tide floats all boats. The scope of practice for RNs in Oklahoma has been a political football for many years. A few powerful groups have consistently attempted to limit and narrow our scope of practice, but for the most part, we have been able to hold them off from making any significant changes. By expanding the scope of practice for AONPs, we will also be strengthening our RN nurse practice act.

So what can I do? I generally read my daily horoscope, not that I believe that it predicts the future, but sometimes they are funny and often they offer good general advice for life. The one for Virgos for today says: “There’s enough wish-washy energy in the world. What everyone needs now is decisiveness, direct and brief.” That’s what you can do to make a mark on the legislators to move the AONP full authority bill forward.

This is an off-election year and a good time to track down your legislators and talk to them about this bill since they won’t be running around the State trying to get re-elected! If you are not sure who your legislators are, you can look them up on the Oklahoma State website or call the ONA office. All the legislators have local offices and you can make an appointment to see them there or see them at their Capital offices. Or you might go to Wal-Mart a few extra times and see them there – that’s where I’ve had some of my best conversations with them!

What do I say to them? First, tell them who you are and what credentials you have. Talk about the work you do and explain how an advanced practice nurse practices. Tell them that a bill is being formulated to allow them to practice at their full scope of practice and that most other states already allow this type of practice. Emphasize the point that full practice authority would improve the health status of the state, including better access to care, improved health in the rural areas of the state and saving health care dollars for Oklahoma.

President’s Message continued on page 2
Published by: 
Arthur L. Davis 
Publishing Agency, Inc.

President’s Message continued from page 1

Become their “buddy!” Tell them that you would be willing to help them with this issue, or any other health care related issue, and give them your business card or name, address and e-mail. Ask them if they would like to sponsor or co-sponsor this bill. They get some type of legislative report card on how many bills they sponsor. Be friendly and charming and thank them profusely for their time. Then call them a week or so later. These are pretty simple things to do, but they will make a significant mark on the health care in Oklahoma if the bill passes. Don’t be an eraser by doing nothing. When legislator say: “I haven’t heard anything about this from anybody,” what they are implying is that the issue is not important and they won’t waste their time dealing with it. “I haven’t heard anything about this from anybody,” what they are implying is that the issue is not important and they won’t waste their time dealing with it. Don’t be an eraser by doing nothing. When legislator say: “I haven’t heard anything about this from anybody,” what they are implying is that the issue is not important and they won’t waste their time dealing with it.

Be positive! Think “THIS BILL WILL PASS!!” These are pretty simple things to do, but they will make a significant mark on the health care in Oklahoma if the bill passes. Don’t be an eraser by doing nothing. When legislator say: “I haven’t heard anything about this from anybody,” what they are implying is that the issue is not important and they won’t waste their time dealing with it. Don’t be an eraser by doing nothing. When legislator say: “I haven’t heard anything about this from anybody,” what they are implying is that the issue is not important and they won’t waste their time dealing with it. Don’t be an eraser by doing nothing. When legislator say: “I haven’t heard anything about this from anybody,” what they are implying is that the issue is not important and they won’t waste their time dealing with it. Don’t be an eraser by doing nothing. When legislator say: “I haven’t heard anything about this from anybody,” what they are implying is that the issue is not important and they won’t waste their time dealing with it. Be positive! Think “THIS BILL WILL PASS!!”

I know you all have the enthusiasm, will and strength to work towards a better Oklahoma.
Executive Director’s Report

Jane Nelson, CAE

Last year at this time,ONA was embarking on a journey. We had just signed the agreement with ANA for our state pilot and were undergoing an operational assessment. In early September the ANA Assessment Team met with the ONA Board to present its findings and recommendations. You heard about some of the recommendations at the 2014 House of Delegates.

And then at the House of Delegates you adopted transformational changes to our organizational structure; ideas and concepts that have been translated into proposed bylaws changes that will be considered by the 2015 House of Delegates. Once the bylaws are in place we will have work to enact these changes – work that will take all of us to transform the way we are functioning at the local level.

As a result of the assessment and the work of the House of Delegates, we developed a Business Plan to focus on our work as well as to use it as a stepping-stone for ONA’s Strategic Plan. In my estimation the result of this work has been transformational to our operations – financial services, technology infrastructure and membership marketing all very much the basis for our transformational membership engagement work that is our next step.

During this year, I have started to drink green tea…more specially Moroccan Mint Green Tea from Honest Tea. I noticed that under the cap of each bottle is a quote – a six-word memoir. I think my favorite one is, “I want to be Tina Fey” not because I want to be her but because it made me laugh. And as we did this very serious work, I needed to laugh.

I uncovered one that summarized the work we were doing with ANA as a result of our Strategic Plan by Andre Gide, a French author and winner of the Nobel Prize in Literature in 1947: “Man cannot discover new oceans unless he has the courage to lose sight of the shore.”

We sailed out to the middle of the ocean by selling 6414 N. Santa Fe, Suite A and moving to 1111 N. Lee, Suite 243. Scaling down our office square footage meant ridding ourselves of paper and other possessions that we had kept for years but weren’t using while ensuring we kept our history – the map of our existence. We have taken another voyage in changing our processing of financials and will embark on another one as we chart our course in investing the proceeds of the sale of the building.

The work that we are doing around membership engagement is a new ocean. Nurses want to be invited to join; they want to be included so we need to make sure we ask them to be a part of ONA. This is how we need to grow!

As the House of Delegates considers the proposed bylaws, I hope that you will consider this six-word memoir from the Dalai Lama, “Open your arms to change, but don’t let go of your values.”

I’m looking forward to the continued progress ONA will make in crossing new oceans, with the direction of the ONA Board and Membership while we continue to hold on to our values! Thank you for your continued participation and support as we work to advance ONA and the profession of nursing in Oklahoma.

Nurses are the heart of the hospital. That’s why we’re looking for nurses who are dedicated and passionate about their work. We’re looking for nurses who can add to our culture of exemplary patient care and personal excellence. We’re looking for exceptional employees.

Northwest is a 504-bed system serving the city of Amarillo and the surrounding region. We offer the ideal combination of traditional values and the most advanced technologies in healthcare, plus the conveniences of big-city living in a friendly, smaller-town atmosphere. From the beauty of Palo Duro Canyon and great recreational facilities, to our quality educational system, Amarillo is a great place to live and work.

Seeking experienced nurses in the following areas: Med Surg, Cardiology, Adult Critical Care, Behavioral Health and Emergency. Increased RN pay rate

C. Craig Cole & Associates
Know Your Rights When a Complaint is Filed Against Your Nursing License

Registered Nurses in Critical Care • Surgery • Emergency Department • Clinic

The Oklahoma Heart Hospital is a purpose-built and specialty cardiac center with medical expertise and compassion to every patient. At OHH, you’ll find a place and a team dedicated exclusively to preventing and treating cardiovascular disease.

Oklahoma Heart Hospital, founded in 2002, is the first all-digital hospital in the U.S. totally dedicated to hearts. Between our 2 campus locations, OHH has a combined total of 147 licensed beds. Winner of the Press Ganey® Award since 2006 and ranked in the top 1 percent nationally since 2003 for patient satisfaction.

To apply, visit our website: www.okheart.com.

The Workforce Neurology Team at North Texas HealthCare is seeking experienced nurses in the following areas:

- Med-Surg
- Cardiology
- Adult Critical Care
- Behavioral Health
- Emergency

Increased RN pay rate

C. Craig Cole, JD | Carrie L. Burnsed, JD
317 NW 12th Street, Oklahoma City, Oklahoma 73103
(405) 232-8700 Telephone | (405) 232-1655 Facsimile | www.ccc-a.com

Nursing Jobs Available

The Air Force Reserve is a part-time commitment with special advantages for healthcare professionals.

Educational: Health Professions Education Loan Repayment Program (ELRP) for certain specialties; Paid Continuing Medical Education (CME) credit; conferences or hands-on training opportunities,

Financial: Special Pay Incentive (SPI) Bonus Program; Health Professions Stipend Program; TRICARE Reserve Select benefits; Retirement benefits; Low cost life insurance; Tax-free shopping at Base Exchanges,

This is your opportunity to serve your country as well as aid in the support of humanitarian and peace-time missions.

Executive Director’s Report

Jane Nelson

Last year at this time, ONA was embarking on a journey. We had just signed the agreement with ANA for our state pilot and were undergoing an operational assessment. In early September the ANA Assessment Team met with the ONA Board to present its findings and recommendations. You heard about some of the recommendations at the 2014 House of Delegates.

And then at the House of Delegates you adopted transformational changes to our organizational structure; ideas and concepts that have been translated into proposed bylaws changes that will be considered by the 2015 House of Delegates. Once the bylaws are in place we will have work to enact these changes – work that will take all of us to transform the way we are functioning at the local level.

As a result of the assessment and the work of the House of Delegates, we developed a Business Plan to focus on our work as well as to use it as a stepping-stone for ONA’s Strategic Plan. In my estimation the result of this work has been transformational to our operations – financial services, technology infrastructure and membership marketing all very much the basis for our transformational membership engagement work that is our next step.

During this year, I have started to drink green tea...more specially Moroccan Mint Green Tea from Honest Tea. I noticed that under the cap of each bottle is a quote – a six-word memoir. I think my favorite one is, “I want to be Tina Fey” not because I want to be her but because it made me laugh. And as we did this very serious work, I needed to laugh.

I uncovered one that summarized the work we were doing with ANA as a result of our Strategic Plan by Andre Gide, a French author and winner of the Nobel Prize in Literature in 1947: “Man cannot discover new oceans unless he has the courage to lose sight of the shore.”

We sailed out to the middle of the ocean by selling 6414 N. Santa Fe, Suite A and moving to 1111 N. Lee, Suite 243. Scaling down our office square footage meant ridding ourselves of paper and other possessions that we had kept for years but weren’t using while ensuring we kept our history – the map of our existence. We have taken another voyage in changing our processing of financials and will embark on another one as we chart our course in investing the proceeds of the sale of the building.

The work that we are doing around membership engagement is a new ocean. Nurses want to be invited to join; they want to be included so we need to make sure we ask them to be a part of ONA. This is how we need to grow!

As the House of Delegates considers the proposed bylaws, I hope that you will consider this six-word memoir from the Dalai Lama, “Open your arms to change, but don’t let go of your values.”

I’m looking forward to the continued progress ONA will make in crossing new oceans, with the direction of the ONA Board and Membership while we continue to hold on to our values! Thank you for your continued participation and support as we work to advance ONA and the profession of nursing in Oklahoma.

Nurses are the heart of the hospital. That’s why we’re looking for nurses who are dedicated and passionate about their work. We’re looking for nurses who can add to our culture of exemplary patient care and personal excellence. We’re looking for exceptional employees.

Northwest is a 504-bed system serving the city of Amarillo and the surrounding region. We offer the ideal combination of traditional values and the most advanced technologies in healthcare, plus the conveniences of big city living in a friendly, smaller-town atmosphere. From the beauty of Palo Duro Canyon and great recreational facilities, to our quality educational system, Amarillo is a great place to live and work.

Seeking experienced nurses in the following areas: Med Surg, Cardiology, Adult Critical Care, Behavioral Health and Emergency. Increased RN pay rate

To apply, please visit: www.nwtexashealthcare.com
The Oklahoma Nurse's Association, Oklahoma Campaign for Action Coalition (OCAC) made nursing leadership a priority to increase the visibility of nurse leaders across the state and underscore the inclusion of nursing knowledge to foster change. In a series of feature articles in The Oklahoma Nurse, the OCAC Leadership Sub-Committee will highlight activities of Oklahoma nurse leaders who currently serve on boards. It is the intention of these feature articles to inspire and challenge Oklahoma nurses to seek leadership positions to change and currently serve on boards. It is the intention of these highlight activities of Oklahoma nurse leaders who currently serve on boards. It is the intention of these highlight activities of Oklahoma nurse leaders who currently serve on boards. It is the intention of these highlight activities of Oklahoma nurse leaders who currently serve on boards. It is the intention of these highlight activities of Oklahoma nurse leaders who currently serve on boards.

Our featured nurse leader is Dr. Janet Sullivan-Wilson, PhD, RN, Associate Professor, Associate Director, and Reynolds Center for Geriatric Nursing Excellence Community Based Interdisciplinary Research, University of Oklahoma Health Sciences Center. Dr. Janet Sullivan Wilson is a founder of the Board’s lethality violence Review Board. She has served as chair, co-chair, and chair of the Oklahoma Domestic Violence Review Board. She has served as chair, co-chair, and chair of the board’s lethality assessment task force. She is appointed to the board by the Oklahoma Attorney General and is the Oklahoma Nurses Association representative. Dr. Janet Sullivan-Wilson was asked to respond to a series of questions about leadership.

Q1: You may be in multiple leadership roles. Please choose one board position in Oklahoma that you would like to talk about. Describe how you got into that position.

Q2: What leadership qualities do you use in that board position?

This has been over the past two decades. But looking back, I had to learn a potpourri of leadership skills like: 1. Assertiveness in defining and forwarding a mission. 2. Expertise and knowledge in using research to fulfill the board’s mission. 3. Creativity, in various approaches, to fulfill the board’s mission. 4. Persistence/dedication to the board’s mission. 5. Bringing diverse people, groups, and professional disciplines to the table for discussion. 6. Patience. 7. Sense of humor. 8. Self-awareness. 9. Seeing and articulating a higher picture or goal. 10. Knowing/feeling relatively comfortable that I don’t have the answers, but the group will/can come up with solutions to problems posed on a board.

Q3: What motivated you to assume this leadership?

Seeing the extent of family and intimate partner violence in Oklahoma and the lack of discourse among inter-professionals and inter-agencies in solving this preventable problem.

Q4: Why do you think it is important that a registered nurse is serving in Oklahoma on this board?

I can only relate why it was important to me as an RN. Since I started this board, I know that nurses like me accumulate experience and knowledge of the realities of public health problems. I had the knowledge that others didn’t at the time know — that is, the extent of the family violence problems in Oklahoma and the power of a diverse interdisciplinary board to collect data to review intimate partner violence deaths to reduce death/injuries. For me it was a professional responsibility to share my knowledge, expertise to resolve the health problems first in our state.

Q5: What specific challenges or barriers do you see for nurses who want to serve as leaders on boards in Oklahoma?

1. Dedication to a particular health issue or problem. 2. Choosing a board with a mission that is a goodness-of-fit with their own skills, passion, and experience.
We welcome applications for all nursing positions, specifically:
Med/Surg • Med/Surg ICU • CVICU • Surgery

Our nurses enjoy competitive benefits & pay, terrific sign-on bonuses, continuing education, a friendly work environment and more!

Learn more and apply online at www.hillcrest.jobs or call 918.579.7645.

Be a part of Changing Lives for the better, together at Hillcrest Medical Center.
Why is there such disconnect between a “traditional” nursing assessment and a holistic one? Nurses have made great strides towards becoming experts at performing physical and emotional assessments, but the spiritual component is often neglected. Nursing needs active dialogue about spirituality in order to address the general absence of practical spiritual assessments and interventions in modern nursing practice.

Reflecting on your own clinical practice, how often have you seen a nurse conduct a spiritual assessment that included more than a single question about organized religion? Did your nursing education prepare you to discuss spirituality with your patients? For many nurses this is a subject that is taught in the abstract, never demonstrated, and then rarely seen again in practice. Rather, the practical application of spiritual assessments is either condensed into a single question about religious preferences or the responsibility is passed on to chaplain services. Yet it is important for nurses to engage in these discussions because we are in an optimal position to help patients integrate their spiritual needs with their plan of care.

Recently the Oklahoma Holistic Nurses Association met to consider the benefits of spirituality in holistic assessments and the barriers to their practical application. Holistic assessments are beneficial because they are structured in a way that facilitates cultural competence and care that is truly patient-centered. The members of OHNA reviewed the FICA and HOPE spirituality assessment tools and found them to be informative and incredibly helpful (Chrash, Mulich, & Patton, 2011; LaRocca-Pitts, 2012). These tools are easy to remember, create more of an opportunity for discussion than the generic checkbox assessments used, and allow for the nurse to bridge the patient’s spirituality and preferences back to their plan of care.

However, these tools are only helpful if nurses are taught how to use them appropriately. These tools have been available for years, but how can nurses be expected to use something they have never seen? After all, physical assessments are not taught from books; a combination of seeing and doing is used to ensure competency. Members of OHNA brainstormed the idea of a holistic skills workshop that would teach and demonstrate holistic tools such as the FICA and HOPE assessments. These workshops would serve to introduce holistic techniques to nurses and nursing students and increase their confidence in using them in the clinical setting. Taking patient spirituality from the abstract to real clinical situations is a must for assessments to become truly holistic. It is time for nurses to listen to the spirit.

If you would like further information on OHNA, holistic assessments, or skills workshops, feel free to email us at Kerianne-may@outlook.com.

References
Highlights from the 107th Annual ONA Convention

Oklahoma Nurses: Integrating Points of Care

Highlights continued on page 8
This year’s Convention, Oklahoma Nurses: Integrating Points of Care, highlighted the impact that Oklahoma Nurses make across all practice settings related to innovative and evidence based practice, as it relates to ethics, quality improvement and technology. Participants of the two-day Convention enjoyed an array of nursing professionals present on a diverse range of topics, including Care Coordination, Health Information Exchange, Legal Issues in Nursing, Palliative Care as well as several other topics.

The Oklahoma Nurses Foundation (ONF) presented a showing of The American Nurse Film to over 60 nurses Wednesday evening. If you are interested in purchasing a copy of the DVD or downloading the film, please visit the ONA website for details. A portion of the proceeds will benefit ONF. Nurses who watch the film can earn CE credit through a partnership with Nurse.com. Please visit the ONA website for more information: www.oklahomanurses.org

Thanks to a dedicated Convention Committee led by ONA Vice President, Pam Spanbauer (2013-2015), nurses from throughout Oklahoma enjoyed a great Convention! Be sure to mark your calendar for the 2016 Convention, which will be held in Tulsa on October 19th & 20th.

Election Results

Congratulations to the newly elected ONA Officers: Vice President Elizabeth Diener, PhD, RN, CNE; Political Activities Director Martha Hernandez, DNP; Practice Director ShyRhonda Roy, MSN, RN; and Emerging Nurse Director Nathan Gomez, RN.

ONW Welcomes New Board Members

Elizabeth Diener, BSN, MSN, PhD was elected as the new Vice President of ONA. She is currently the Chair of Graduate Education and Associate Professor at Oklahoma City University, Kramer School of Nursing in Oklahoma City. She is an ANA/ONA Member, has participated as a 2015 Annual Convention Committee Member and is the OKHPNA President (term expires 01/16), NLN member and school Ambassador for KSN, Caritas Coach through Waton Caring Science Institute since 10/08. Her education includes Diploma-Barnes SON, St. Louis, MO 1973, BSN-Lindenwood College, St. Charles, MO 1979, MSN- U of Missouri, Kansas City 1994, PhD-U of Missouri St. Louis, 2003.

Nathan Gomez, RN was elected as the Emerging Nurse Director. His current position is at Coronary Care ICU, INTEGRIS Baptist Medical Center, Oklahoma City, OK and Adult Medicine Specialty OU Medical Center. He is an ONA/ANA Member and graduated from Oterio Junior College, La Junta, CO with an Associate’s Degree in Nursing, 2014.

ShyRhonda Roy, MSN, BSN, ADN was elected as the ONA Practice Director. Currently, she is the Critical Care Educator for the VA Nurse Academic Partnership with the University of Oklahoma HSC, College of Nursing (VANAP-Nurse Residency) & Facility Simulation Coordinator at the Oklahoma City VA Medical Center. She has been an active participant on the ANA workgroup revising the Nursing: Scope and Standards of Practice, Third Edition, due for release in July 2015. She is an active Hero Homecoming Committee Member and serves as the volunteer lead for VA Employees for the Limbs for Life Blaze 5K run & Hero Homecoming 2015. Her education includes Diploma-Barnes SON, St. Louis, MO 1979, MSN- U of Missouri, Kansas City 1994, PhD-U of Missouri St. Louis, 2003.

Martha Hernandez, DNP was elected as the Political Activities Director. Currently, she practices as an APRN at Balance Women’s Health in Moore, OK. She is an ONA/ANA Member, Oklahoma Medical Reserve Corps, American Psychiatric Nurses Association Member, Oklahoma Chapter, she is a Charter Board Member for the Oklahoma Chapter and current Immediate Past President. She participated in the Oklahoma Academy Town Hall Conference: We can Do Better-Improving the Health of the Oklahoma People, Sapulpa, OK, 2014. Her education includes the University of Tennessee Health Science Center, Memphis, TN, DNP: 2014, University of Oklahoma Health Science Center, OKC, OK, MS: 1999, Oklahoma Baptist University, Shawnee, OK, BS, 1981; BA, 1979.

Awards

Each year, ONA has the opportunity to recognize leaders who have made a difference in the nursing profession. They have been faced with changes and challenges and have risen above them. We honor the leaders who have displayed excellence and have advanced our profession and industry.

This year, ONA presented two nurses with the Excellence in Nursing Award, which honors an ONA member who has developed an innovative, unique, and creative approach utilizing nursing theory and knowledge/skills in any practice setting: administration, education, and/or direct patient care. These individuals are recognized by peers as role models of consistently high quality in their nursing practice and as one who enhances the image of professional nursing by creating an environment promoting professional autonomy and control over nursing practice.

Donna Fesler, MSN, RN, CPAN (Excellence in Nursing Award – Education) and Karen Ann Taylor, DNP, APRN-CNP, PMHNP-BC (Excellence in Nursing Award – Direct Patient Care) were recipients of this year’s Excellence in Nursing Award.

Donna Fesler has devoted her professional life in service to others in education. She is currently a Clinical Instructor for the University of Oklahoma College of Nursing in Tulsa since 2010. She is the lead faculty advisor for the Institute for Healthcare Excellence.

Now recruiting for Full time Registered Nurse - 12 hour shifts

• Current AR state license
• 1 year Med/Surg experience required
• Current CPR required

Apply at: www.selectmedical.com Email: marlcarter@selectmedical.com

McAlester Regional Health Center
Southwest Oklahoma’s Leading Healthcare Resource

1 Clark Bass Blvd. · McAlester, OK 74501 · (918) 426-1800

NOW HIRING

• Nurse Practitioner
• Med/Surg • ICU • ER
• Labor and Delivery

Contact Tiffany Roberts at 918-421-6941
Or email resume to mrhcrcruiter@mrhocok.com

Visit www.mrhocok.com for more information.

APRN/RN/LPN

Come join our team in positively changing lives

Full Time and Part Time Contract
Community Mental Health
One year experience required
Must be Board Certified or Eligible

To Apply: www.red-rock.com or submit resume to hr@red-rock.com

Red Rock RHS is an Equal Opportunity Employer
Minneapolis, Minnesota.

Karen has been a nurse for over 25 years. Her experience includes intensive care, home health, and mental health. Over the course of her practice she became passionate about psychiatric nursing and she was determined to return to school so she could advance the level of care she provided to her patients. In 2004, she completed a Bachelors of Nursing at Northeastern State University in Tahlequah, Oklahoma. She has also earned her certification as a Nurse Educator from the National League of Nursing, Inc. She has served as a faculty advisor to the TCC Student Nurses’ Organization for five years; she mentored students in leadership, professionalism, and importance of membership in the professional association.

Mary Helen began her education by earning a diploma in nursing from Mt. Carmel School of Nursing in Pittsburg, Kansas. She received her BSN and MS in nursing from Southern Nazarene University in Bethany, Oklahoma. She has also earned her certification as a Nurse Educator from the National League of Nursing, Inc. She has served as a faculty advisor to the TCC Student Nurses’ Organization for five years; she mentored students in leadership, professionalism, and importance of membership in the professional association.

Mary Helen Freter, MS, RN received the Nightingale Award of Excellence, which recognizes an ONA member, who during her career has demonstrated innovative strategies to fulfill job responsibilities in her professional role and within the community. It recognizes a nurse that consistently surpasses expectations of a professional nurse; thus enhancing the image of the nursing profession. As well as someone who demonstrates sustained and substantial contribution to the Oklahoma Nurses Association and has served as a role model of consistent excellence in their area of practice.

Mary Helen began her education by earning a diploma in nursing from Mt. Carmel School of Nursing in Pittsburg, Kansas. She received her BSN and MS in nursing from Southern Nazarene University in Bethany, Oklahoma. She has also earned her certification as a Nurse Educator from the National League of Nursing, Inc. She has served as a faculty advisor to the TCC Student Nurses’ Organization for five years; she mentored students in leadership, professionalism, and importance of membership in the professional association. She has been a member of the Oklahoma Nurses Association and American Nurses Association for 16 years. Pam Price-Hoskins says, “she tirelessly promotes the image of nursing and nursing in Oklahoma, and strives to keep nursing in the forefront of all her concerns.”

Karen Ann Taylor is currently employed as a Psychiatric Mental Health Nurse Practitioner working with Native Americans in a rural tribal mental health clinic, where she implemented a Telemental Health clinic to improve patient access to services.

Karen has been a nurse for over 25 years. Her experience includes intensive care, home health, and mental health. Over the course of her practice she became passionate about psychiatric nursing and she was determined to return to school so she could advance the level of care she provided to her patients. In 2004, she completed a Bachelors of Nursing at Northeastern State University in Tahlequah, Oklahoma. She has also earned her certification as a Nurse Educator from the National League of Nursing, Inc. She has served as a faculty advisor to the TCC Student Nurses’ Organization for five years; she mentored students in leadership, professionalism, and importance of membership in the professional association. She has been a member of the Oklahoma Nurses Association and American Nurses Association for 16 years. Pam Price-Hoskins says, “she tirelessly promotes the image of nursing and nursing in Oklahoma, and strives to keep nursing in the forefront of all her concerns.”

Mary Helen Freter

Teresa Gray, RN, BSN, MBA, NEA-BC Vice President/Chief Nursing Officer accepted the award for Excellence in Workplace on behalf of INTEGRIS Canadian Valley Hospital. This award is presented to organizations that have developed positive work environments. These organizations must have developed an innovative and effective program, approach or overall environment that promotes excellent nursing care, creating a positive environment for nurses to work and supports nurses in their practice.

INTEGRIS Canadian Valley Hospital was also recently awarded the Pathway to Excellence designation. This recipient is one of only 132 organizations worldwide that hold this designation and one of only two hospitals in the state of Oklahoma. The Pathway to Excellence Program recognizes health care organizations for positive practice environments where nurses excel. This hospitals journey consisted of several years forming a structure of nursing shared governance, and accountability. Creating a work place where nurses are included, appreciated and have a voice to impact change in the profession.

URGENT! Nurses needed

Currently Hiring for PRN shifts and local contracts:

- RN: $33-$40 per hour
- LPN: $24-$26 per hour
- CNA: $13-$16 per hour
- MAT/CMA: $13-$16 per hour

Currently staffing in Tulsa, Oklahoma City, Edmond, Cushing and Western Oklahoma.

Elite offers FREE Health Insurance, PTO, voluntary dental, vision, life and disability insurance and many other benefits.

Apply online at www.elitemedicalstaffing.net or call 580-336-9190 for more information.

Mary Helen Freter

Teresa Gray and team
Sleeping Giant Awakened as Nurses Mocked on National Television Talk Show

Following the Miss America pageant, the women on “The View” gave their opinions on Ban American Nurses, a nurse, who gave a moving monologue about caring for Alzheimer patients. These women went on to mock other contestants as well. Obviously, their actions speak volumes about their own regard for other women, thinking that it is acceptable and even entertaining to mock others in front of a national audience, as if their conversation is cute and funny rather than inappropriate and spiteful.

This behavior, however, roused an entire nation of nurses and their supporters to band together and speak up in support of the nursing profession. Mocking 3 million nurses is not a great career move obviously as The View lost most of their major supporters who withdrew their advertising dollars in support of nurses.

What I find fascinating is that it took an attack on one of their own to mobilize nurses across the nation to speak up and share with the public who we are. Were we content before, working nation to nation to speak up and share with the public who we are? Were we content before, working on behalf of nurses as a career. So few had taken this stand publically until now. Now the sleeping giant has awakened. Nurses have always been the most trusted profession, but now… could it be viewed as the most powerful voice in healthcare? NO, I don’t think we were content to be quiet, but I do think nursing as a profession needed a rallying point: An issue in which we could all voice our pride in our profession as well as point out in each of our individual realms of specialty care how our role keeps healthcare delivery moving forward every day. Nurses have always been vocal about patient care, now it is time to be vocal about the profession. Before the giant falls asleep again, only to be awakened when another arrow is shot in its direction, this is an opportunity for nursing organizations, schools of nursing, nursing leaders in all health care organizations and individual nurses to unite in one voice, pooling our resources, and craft the message the public needs to hear and proclaim it over and over:

“Nurses are the voice of healthcare. Nurses are the hands that turn the wheels of healthcare. Nurses will lead the changes in the healthcare that need to be redesigned to meet the changing demands of Americans.” It is time for lobbyists, insurance companies, congress and the medical associations to stop trying to redesign a health care system that they don’t fully understand. Nurses are no longer willing to wait to be invited to the table, we are ready to pull up our sleeves and explain why you should listen to us. We, who hold the hand of the dying, cradle the newly born, make split second decisions in critical emergencies to help save lives, go into prisons, ghettos, and facilities to put our hands on the most vulnerable of the ill, we who listen to the stories of Americans – memories of days past, dreams of the future, moments of joy and anger all shared with the nurse at the bedside. We who work with criminal investigators to find clues on bodies so the dead get justice, we – the 3 million nurses in America who stood up and said “No, we don’t wear a costume and carry a doctor’s stethoscope, in America who stood up and said “No, we don’t wear a costume and carry a doctor’s stethoscope, nurses in the United States… nurses in the United States – memories of days past, dreams of the nation to wake up and speak up, we have always been vocal about patient care, now it is time to be vocal about the profession. Before the giant falls asleep again, only to be awakened when another arrow is shot in its direction, this is an opportunity for nursing organizations, schools of nursing, nursing leaders in all health care organizations and individual nurses to unite in one voice, pooling our resources, and craft the message the public needs to hear and proclaim it over and over:

“We are nurses, 3 million strong, a giant who cares for Americans in clothing that lets us run to rooms in emergencies, get your blood on us, and protects you from deadly germs. We wear the stethoscope of our choosing to hear the newborn baby breath and listen for holes in their hearts, we listen to the newly transplanted hearts, we listen to the coarse rattle of lungs damaged from disease, we listen to abdomens in areas devastated by floods, hurricanes and tornadoes to offer first aide and a shoulder to cry on. We who work with criminal investigators to find clues on bodies so the dead get justice, we – the 3 million nurses who stood up and said “No, we don’t wear a costume and carry a doctor’s stethoscope, nurses in the United States.”

The giant is awake, now is the time, now is your time – lead nurses, lead… We’re Hiring Nurses! Apply Online: 1072 E. Choisy St. • Cushing, OK 74023 We’re Hiring Nurses! Apply Online: Hillcrest Hospital/CushingJobs.com Hillcrest Hospital/Cushing • Public Health Nurse 8-4:30, Monday-Friday schedule with great benefits. Interested applicants will apply online at www.occhd.org NURSING OPPORTUNITY $10,000 sign on bonus for RNs: Learn more. To view our current openings, please visit saintfrancis.com/career. Harris College of Nursing & Health Sciences Fully Online Graduate Nursing Programs • MSN for Clinical Nurse Leader, Clinical Nurse Specialist, and Nurse Educator • Post-master’s DNP for APN/NS and Nurse Administrators • BSN to DNP for Family Nurse Practitioner and Clinical Nurse Specialist (open to Texas residents only) • Oncology specialist option available

Find your future here. • Search job listings in all 50 states, and filter by location & credentials • Browse our online database of articles and content • Find events for nursing professionals in your area Get started now! www.nursingALD.com

Arthur L. Davis Publishing Agency, Inc.
Nancy Eckerd, MS, RN

show hope that surpasses understanding.

Nurses are licensed professional leaders who use their stethoscopes to listen, to reveal, to heal, and to give hope that surpasses understanding.

We use our stethoscopes to analyze your disease process and critically thinking through your symptoms.

We use our stethoscopes throughout the life continuum, in wellness and disease.

The nurse is the first professional who listens to your heart minutes after birth and the last professional who listens while advocating for a “good” death.

We use our stethoscopes to provide care not based on your disease, your wealth or your intellect, but our calling to this profession.

Jessica Cochrane, BSN, RN-BC

Salet Tuney, BS, RN

Lindsey West, BSN, RN-BC

Stethoscopes are to nurses as books are to teachers.

We use them to keep doctors informed and save lives! Jessica, Salett and Lindsey

by Sierra Dawn Elsey, Registered Nurse, Bachelor of Science in Nursing, Certified Breastfeeding Specialist, Bachelor of Science in Health Science

This is a picture of me, a Registered Nurse, with MY stereoscope. I use my stethoscope to auscultate lung sounds, heart sounds and bowel sounds. My stethoscope has helped me to find heart murmurs, pneumonia, and blood clots... All while my ears were listening on the other end.

My stethoscope has helped me gauge the 1 and 5 minute apgar score of infants after birth... all while my ears were at the other end. Though nurses and physicians often work closely together, they also work independently of each other. I educate, investigate and care... all on my own. Many times, physicians even ask to use my stethoscope, yes, a nurse's stethoscope. My hope is that we will see that nurses are not just a group of people created to serve a physician. We have a variety of functions to serve a variety of people. We are far more educated than most realize. We have our own autonomy. Furthermore, I hope that we, as Americans, see that there is a very powerful group of people that sway a large number of us to think the way they want us to on a variety of subjects that they are purely uneducated about.

Christy Jones, RN

It is unfortunate that there are people that make ignorant statements in an attempt to be funny. But just like our patients, sometimes we are mistreated. I must remember that “hurting people, hurt people.” I am proud to be a nurse, and happy to use my own stethoscope every single day!

This is not a doctor’s stethoscope, it belongs to a nurse. It has heard the sound of a heart stop beating, the sound of lungs clearing of congestion, the sounds of bowels waking up after abdominal surgery. As nurses, we have a sacred responsibility to assess our patients and report any changes. My stethoscope has provided information many, many times over the last 36 years that has helped a patient to live or to die without struggles.

April Loeffler

I am happy to show my support of nurses and to join in helping educate the public about the role of the nurse, including that nurses use stethoscopes to help save patients’ lives. I think this social media campaign brought awareness to the nursing profession and also helped nurses realize the voice that we have when we unite. As part of the largest health care profession in the country, it’s important that we unite more often and let our voice be heard to influence the public about what nurses do.

Lucas Richardson-Walker, RN

I am proud to be an OKLAHOMA NURSE! I wear my stethoscope with pride. I was so impressed with the Nurse that stood up with pride wearing her stethoscope for the Miss America pageant when I saw the video on face book. Then I heard the response of the Ladies on “The View” talk show! I was shocked! I heard the response of the “good” death.

I am PROUD to be an OKLAHOMA NURSE! I am PROUD to be a nurse and I worked hard for my license. Nursing is my talent, not just a talent but a passion. I am an educator for the future generation of nurses and I know better! We are not “just a nurse” and its not a “doctors stethoscope” WE have again taken it out and show to the world WE HAVE A VOICE AND ARE NOT AFRAID TO USE IT! This has educated so many that truly felt oh they’re just a nurse! Now they know better! We are not “just a nurse” and its not a “doctors stethoscope” WE have again taken something negative and turned it into a positive for our profession! I am proud of all the fellow men and women out there that wear their stethoscope with pride!

And yes I am a PROUD OKLAHOMA NURSE!

by Angela Martindale, MSN, RN

The Oklahoma Nurse • Page 11

we are. If the ladies on the View don’t know, then perhaps others don’t know either!

Hopes are licensed professional leaders who use their stethoscopes to listen, to reveal, to heal, and to give hope that surpasses understanding.

We use our stethoscopes in analyzing your disease process and critically thinking through your symptoms.

We use our stethoscopes throughout the life continuum, in wellness and disease.

The nurse is the first professional who listens to your heart minutes after birth and the last professional who listens while advocating for a “good” death.

We use our stethoscopes to provide care not based on your disease, your wealth or your intellect, but our calling to this profession.

We use our stethoscopes to provide care not based on your disease, your wealth or your intellect, but our calling to this profession.

Lucas Richardson-Walker, RN

I am PROUD to be an OKLAHOMA NURSE! I wear my stethoscope with pride. I was so impressed with the Nurse that stood up with pride wearing her stethoscope for the Miss America pageant when I saw the video on face book. Then I heard the response of the Ladies on “The View” talk show! I was shocked! I heard the response of the “good” death.

I am PROUD to be an OKLAHOMA NURSE! I wear my stethoscope with pride. I was so impressed with the Nurse that stood up with pride wearing her stethoscope for the Miss America pageant when I saw the video on face book. Then I heard the response of the Ladies on “The View” talk show! I was shocked! I heard the response of the “good” death.

I am PROUD to be an OKLAHOMA NURSE! I wear my stethoscope with pride. I was so impressed with the Nurse that stood up with pride wearing her stethoscope for the Miss America pageant when I saw the video on face book. Then I heard the response of the Ladies on “The View” talk show! I was shocked! I heard the response of the “good” death.
The controversy began on Monday (September 14) when Joy Behar and Michelle Collins of The View made disparaging comments regarding Ms. Johnson’s monologue, stating that she came on stage and “basically read her e-mails out loud,” and questioning, “Why was she wearing a ‘doctor’s stethoscope’?” The response on social media was immediate and assertive. It was as if a sleeping giant had awakened, and bellowed loudly, I might add. Most statements I read were respectful and instructional, yet very firm, stating in very precise terms what those nurses use their stethoscopes for, clarifying the importance of assessment skills to the obviously uninformed talk show hostesses.

Some nurses spoke of their commitment to their patients, the spirituality of their work, and just what it meant to care for a patient from a heart-centered sense of commitment and caring. One mom who had delivered a healthy baby also wrote with great appreciation about the care she had received throughout her delivery and her postpartum experiences, posting the classic photo of her cradling a newborn surrounded by scrub-clad nurses and techs, smiles all around. A Native American nurse had posted a picture of a beautifully beaded stethoscope which was a gift from another Native American nurse who had lovingly and prayerfully applied the artistic/spiritual/cultural expression to the scientific instrument. Some more cynical proclamations warned them of what might happen if the talk show hosts needed nursing care for, clarifying the importance of assessment skills terms what those nurses use their stethoscopes instructional, yet very firm, stating in very precise add. Most statements I read were respectful and questioning, “Why was she wearing a ‘doctor’s stethoscope’?” The response on social media was immediate and assertive. It was as if a sleeping giant had awakened, and bellowed loudly, I might add. Most statements I read were respectful and instructional, yet very firm, stating in very precise terms what those nurses use their stethoscopes for, clarifying the importance of assessment skills to the obviously uninformed talk show hostesses.

Some nurses spoke of their commitment to their patients, the spirituality of their work, and just what it meant to care for a patient from a heart-centered sense of commitment and caring. One mom who had delivered a healthy baby also wrote with great appreciation about the care she had received throughout her delivery and her postpartum experiences, posting the classic photo of her cradling a newborn surrounded by scrub-clad nurses and techs, smiles all around. A Native American nurse had posted a picture of a beautifully beaded stethoscope which was a gift from another Native American nurse who had lovingly and prayerfully applied the artistic/spiritual/cultural expression to the scientific instrument. Some more cynical proclamations warned them of what might happen if the talk show hosts needed nursing care in the upcoming months. Fortunately, there were very few of those statements on my news feed.

Many of the responses I read were those of former students. I felt proud as their former faculty that they were able to express their identities and ethics as registered nurses with such clarity, precision, pride, and strength. Clearly, they were finding their voices and their values as Kelley Johnson, Miss Colorado had hoped they would. Although the Tweets and Facebook posts have dissipated over the ensuing weeks, I have felt grateful that Ms. Behar and Collins committed these faux pas, which made many of us pause to consider what we do as nurses, and to appreciate what we bring to our profession and our communities.

Looking into the future, I wonder if we as a nursing community can learn from the simple yet incredibly powerful story of a novice nurse, and encourage one another to continue sharing stories of our nursing experiences, and to listen deeply and lovingly to one another as we engage in the meaning of what it is to be a nurse, at this interesting time of complexity and sometimes chaos in the health care professions. Could we gather in circles of friends and supportive coworkers to cherish that which we may some days struggle through, and some days take for granted, in this precious profession that blesses and heals so many? Could we draw in our brothers and sisters of other health care disciplines to enrich our stories? Could we share our deepest fears about our abilities to be of service in the way that we do as nurses, and to appreciate what we take for granted, in this precious profession that blesses and heals so many? Could we draw in our brothers and sisters of other health care disciplines to enrich our stories? Could we share our deepest fears about our abilities to be of service in the way that we do as nurses, and to appreciate what we

Another “View” continued on page 13
that our patients need us to be? Could we speak of the unspeakable sadness, and go to the dark places in our souls where life and death dance on a daily basis? Could we acknowledge the joy in our work, and be unafraid to dance and sing, and tell each other how much we love ourselves, our colleagues and coworkers, and our patients? We are our stories, and perhaps the beauty in this awkward and ungraceful moment for these unfortunate talk show hosts is that they awakened the storyteller in all of us to come forward and share our beautiful, dangerous, stories. Beyond the sharing, coming to understand what each person’s personal experience means, how it touches on our own understanding of our own experiences, and honoring the poetry of our work as nurses will sustain us and all whom we care for.

Nancy Vitali is a nursing faculty at Tulsa Community College. She is currently engaged in designing a research project using narrative inquiry methodology, and hopes to understand the experiences of nursing faculty who teach from the heart. She can be reached at: Nancy.vitali@tulsacc.edu.

---

Vanessa Wright, RN, MSN

The recent comments made by the hosts of “The View” were unfortunate. However, the nationwide and collective response of nurses is inspiring. I would like to see nurses continue to unify and educate the public on other important healthcare issues and misperceptions. Nursing is a caring science and we want to be portrayed as the professionals we are.

Joyce A. Van Nostrand, PhD, RN, CNE,ONA President-elect

October 13, 2015

“The View” episode is one of few sentinel events that I can recall in my 47 years in nursing! Sentinel in this case means something that caused nurses to really stand up and count in terms of power, image, and visibility. The last one of this magnitude was probably when physicians tried to create a new healthcare worker under their license. After the infamous comments about “doctor’s stethoscope” and “costume” were publicized, my initial thoughts were pretty negative, e.g. two feet in the mouth stupid and embarrassing. In this day and age, it was so bad that they had made these comments on national TV, and apparently were so sadly uneducated. I assumed that they had never had the occasion to encounter a RN or APRN – wrong assumption! I also assumed that they hadn’t listened to what Miss Colorado had said! Talk about an explosion of reactions on social media! I couldn’t keep up! I was so proud of all the nurses who thoughtfully reacted. Our ANA President Cipriano led us in turning this event into a positive … an opportunity to reach out and correctly educate everyone about registered nurses, advanced practice, and nursing in general. Nursing really demonstrated its power in the numbers on Facebook and Twitter! We received apologies, retractions, further national coverage, and support. It was quite amazing to see support from other professions on Facebook. Even my dentist brought up the event for discussion and his support of nursing!

All this led to further thoughts. Is a negative event required for nursing to show its power? What prevents nursing from uniting and acting on numerous other health-related issues? Acting is the key word! What does the nursing profession need to “stand up” within a facility or agency, state, nation, and the world? Certainly no easy answers, but focusing on a positive perspective instead of a negative one is a good start!

Joyce Van Nostrand

---

SimpleWreath specializes in handmade, natural looking wreaths that enhance the beauty of your home, both inside and out.

Etsy:
http://www.etsy.com/shop/simplewreath

Facebook:
https://www.facebook.com/simplewreath

E-mail:
simplewreath@gmail.com

Custom orders & monograms available!

Please enjoy 10% off with coupon code: NURSE10

---

Earn a Credential That’s in Demand Nationwide

- “Top Tier” ranked nursing school
- Practice specialties for all interests
- State-of-the-art nursing simulation lab
- Community of scholars with broad faculty expertise
- Distance learning opportunities
- And more! Visit NSUOK.edu

Northwestern State University

OPPORTUNITIES AHEAD.

- 100% online classes
- RN-BSN & MSN-Education Programs; ACEN accredited
- High quality affordable education
- Full or part-time students
- Admissions twice a year
- New curriculum to better meet YOUR needs & schedule

www.nsuok.edu/nursing | 918-444-5410
Matt Hovde, a professional comedian from the Second City in Chicago, recommends 5 easy steps to become funnier. Let’s explore them from a nursing perspective.

1. Observe the world. Commit to seeing your world through new eyes and make fun of it. The most powerful antidepressant has 4 paws, fur and a wagging tail.” (SnarkEcards)

“An elderly gentleman had serious hearing problems for a number of years. He went to the doctor and the doctor was able to have him fitted for a set of hearing aids that allowed the gentleman to hear 100%. The elderly gentleman went back in a month to the doctor and the doctor said, ‘Your hearing is perfect. Your family must be really pleased that you can hear again.’ The gentleman replied, ‘Oh, I haven’t told my family yet. I just sit around and listen to the conversations. I’ve changed my will three times!’” (email)

“Almost gave a patient’s shot to her husband who was sleeping in her bed while she went potty.” – Tracilyn H. (Facebook.com, Funny Nurses, October 5, 2015)

2. Work your funny bone. You gotta exercise your funny muscles to get ripped.


“Having to urinate in a patient’s bathroom before you have an incontinent moment, #gottagorightnow.” – Natasha J. Louis (scrubsmag.com, 11/17/14)

“Favorite one around where I work is to send students or newbies to the supply room or to another department looking for left handed syringes.” – Jennifer Council-Davidson (Facebook.com, Funny Nurses, 10/4/15)

“My co-workers set up IV tubing to run from one spot to the other under the desk at the nurses station, then opened the clamp when people sat down, so after a minute they realized they had a wet lap, it looked like they peed themselves.” – Danielle Barlow (Facebook.com, Funny Nurses, 10/4/15)

3. Learn to say “Yes, and…” Hovde asserts that, “creative thinking is much easier when we listen to, accept and build off each other’s ideas.”

“When your patient codes after being involved in a biological waste spill, then starts mumbling about brains when you bring them back. It’s probably best to leave the building at a high rate of speed before they get really hungry.” – (Agatha Lellis, 10/6/15, Facebook.com)

Mom: “My checkout went well, but the doctor wants me to cut back on the stress in my life…” He says I should take some quiet time to care for my inner child. Do you understand what that means? Son: “I think so–you’re pregnant, right?” – (“The Born Loser,” cartoon, Sansom, 3/11/13)

“I was born with a third arm and eyes in the back of my head. What gets me strange looks when I walk down the street is an asset in the nursing world.”

4. Use Silly Words.


“My my, what a beautiful day-I think I’ll skip my meds and make fun of it…” (SnarkEcards)

“Almost gave a patient’s shot to her husband who was sleeping in her bed while she went potty.” – Tracilyn H. (Facebook.com, Funny Nurses, October 5, 2015)

“I was born with a third arm and eyes in the back of my head. What gets me strange looks when I walk down the street is an asset in the nursing world.”

“I’m afraid I have some bad news. What is it Doc? I can’t even pronounce what you have.” – (“Shoe,” cartoon, Brookins, 11/11/11)

“How to be FUNNY continued on page 15
How to be FUNNY continued from page 14

I’ve always been really good at translating complex technical terms into English without making the other person feel like an idiot.” – (Agatha Lellis, Facebook.com, 9/28/15)

Ascites – Failure to ensure pre-operative marking of the site.

Bronchopneumonia – Rodeo rider’s chest infection.

Compound Fracture – Interesting fracture generating more interest.

Cytotoxic – Can be irritating to the eyes.

Dilate – To live long.

Distension

Mammogram

Influenza

~ Bank for transplantible

Human Resources

Postoperative

Platelets

Outpatient

~ A person who fainted.

~ Understaffed departments.

Influenza – Occupational disease of chimney sweeps.

Mammogram – Urgent message to mother.

Outpatient – A person who fainted.

Platelets – For patients with small appetites.

Postoperative – A letter carrier.

Pressure Areas – Understaffed departments.

Sliding Scale – Drunkeness defined by the frequency of falls.

Sternum – The unfunny bone.

Total Hip Replacement – restoration of cool.

Total Parenteral Nutrition – preference for Mom’s Home Cooking.


5. Get over yourself. Humor flows easier when we strip off our ego and reject the fear that encourages it.

“What do I have to do to get a pat on the back? Go thru airport security.” – (“Shoe,” cartoon, Brookings, 8/29/14)

“You know you’re an ICU Nurse “When your alarm clock wakes you and you wonder which patient to stand my ground against bullies.” – (Agatha Lellis, Facebook.com, 9/28/15)

“If you are always trying to be normal, you will never know how amazing you can be.” – (Maya Angelou)

LOOKING FOR A PLACE TO HANG YOUR SCRUBS?

Our Healthcare Heroes Enjoy:

• Exceptional Salaries

• Competitive Bonuses

• Travel/Local Government

www.GIFTEdHealthcare.com

(844) 700-4438

They Are VETERANS

• They are mothers and fathers, sons and daughters

• They are professionally skilled craftsmen, and retirees

• They are the reason Americans are free

• They are brave, and they have been tested by fear

• They are determined, and they have overcome great odds

• They are enduring symbols of freedom

• They are United States veterans

• They are the reason we care

VA: Keeping the Promise to Those Who Served

The Oklahoma Nurse  •  Page 15

Stillwater Medical Center is a 119-bed acute care general hospital offering a full range of services to patients throughout north central Oklahoma.

SMC is Ranked in the “Top 100 Best Places to Work in Healthcare” for 3 years, PLUS has:

• 97% Employee Satisfaction Rating in 2015

• Excellence in Patient Experience

• RN Career Ladder and Lucrative Benefit Package

Find your new career! www.stillwatermedicalcareers.com

Contact: Lea Brown, RN Recruiter 405-742-5759

Earn Your Degree in Nursing at the University of Central Oklahoma

PROGRAMS AVAILABLE

• Bachelor of Science in Nursing

• Traditional

• Career Advancement RN to BSN and LPN to BSN programs

• Master of Science in Nursing Education of Specialty Focus

PERSONAL & FLEXIBLE

• Small Classes

• Personalized Degree Completion Programs

• Tailored for Busy Adults

• Full and Part-time, Day and Night Options

AFFORDABLE

• Competitive Tuition

• Financial Aid and Scholarships available

QUALITY

• Ranked in the Top 51 Nursing Programs in the Nation by College Atlas

VA: Keeping the Promise to Those Who Served

They Are VETERANS

• They are mothers and fathers, sons and daughters

• They are professionally skilled craftsmen, and retirees

• They are the reason Americans are free

• They are brave, and they have been tested by fear

• They are determined, and they have overcome great odds

• They are enduring symbols of freedom

• They are United States veterans

• They are the reason we care

VA: Keeping the Promise to Those Who Served

They Are VETERANS

• They are mothers and fathers, sons and daughters

• They are professionally skilled craftsmen, and retirees

• They are the reason Americans are free

• They are brave, and they have been tested by fear

• They are determined, and they have overcome great odds

• They are enduring symbols of freedom

• They are United States veterans

• They are the reason we care

VA: Keeping the Promise to Those Who Served

How to be FUNNY continued from page 14

I’ve always been really good at translating complex technical terms into English without making the other person feel like an idiot.” – (Agatha Lellis, Facebook.com, 9/28/15)

Ascites – Failure to ensure pre-operative marking of the site.

Bronchopneumonia – Rodeo rider’s chest infection.

Compound Fracture – Interesting fracture generating more interest.

Cytotoxic – Can be irritating to the eyes.

Dilate – To live long.

Distension

Mammogram

Influenza

~ Bank for transplantible

Human Resources

Postoperative

Platelets

Outpatient

~ A person who fainted.

~ Understaffed departments.

Influenza – Occupational disease of chimney sweeps.

Mammogram – Urgent message to mother.

Outpatient – A person who fainted.

Platelets – For patients with small appetites.

Postoperative – A letter carrier.

Pressure Areas – Understaffed departments.

Sliding Scale – Drunkeness defined by the frequency of falls.

Sternum – The unfunny bone.

Total Hip Replacement – restoration of cool.

Total Parenteral Nutrition – preference for Mom’s Home Cooking.


5. Get over yourself. Humor flows easier when we strip off our ego and reject the fear that encourages it.

“What do I have to do to get a pat on the back? Go thru airport security.” – (“Shoe,” cartoon, Brookings, 8/29/14)

“You know you’re an ICU Nurse “When your alarm clock wakes you and you wonder which patient to stand my ground against bullies.” – (Agatha Lellis, Facebook.com, 9/28/15)

“If you are always trying to be normal, you will never know how amazing you can be.” – (Maya Angelou)
The nursing shortage in the 1970s and 1980s brought about changes in staffing patterns including the incorporation of 12-hour shifts. This trend continues as employers find 12-hour shifts more cost effective, decrease handoff errors and increase continuity of patient care. Some nurses prefer 12-hour shifts because they are able to work fewer days per week decreasing travel time and childcare costs. They enjoy more work-life balance and have the opportunity to seek additional employment on their days off.

Proponents of 12-hour shifts argue that 12-hour shifts lead to consistency and continuity of care because there is a reduction from three hand-offs to two hand-offs between nurses every 24-hours. Less hand-offs may also decrease the incidence of errors and sentinel events. Stone et al. (2006) found that 12-hour shifts led to greater job satisfaction, less absenteeism, and decreased turnover rates in staff. Medication errors, patient falls, and the incidence of decubitus ulcers measure of quality were similar in all shift lengths.

Despite the advantages of 12-hour shifts, concern has been expressed about nurses’ health and patient safety when nurses work for long periods of time. There are many other service related professions that work shifts greater than eight hours. The U.S. military has guidelines for related professions that work shifts greater than 12-hours. The U.S. military has guidelines for related professions that work shifts greater than 12-hours. The U.S. military has guidelines for related professions that work shifts greater than 12-hours.

Multiple studies and organizations recognize the correlation between nurse fatigue and the health and well-being of individual nurses and patient outcomes. However, there are no national policies addressing nurses’ responsibility for health and performance or for institutions’ responsibility for safe scheduling. It’s time that Oklahoma Nurses visit this concern.

References

Is it Worth the Risk? 12-Hour Shifts and Nurse Fatigue

Amy M. Richards, MSN, RN (ONA Member)
Danna Harrison Weathers, MS, APRN, FNP-BC, CEN
Ronak Hassan Barwari, MSN, BSN
Vicky Reith, MS, RN

We are seeking Registered Nurses in the following areas and locations:

- Home Health (Tucumcari and Clovis)
- ICU (Clovis)
- Case Management (Clovis)
- Outpatient (Clovis)
- Med Surg/ER (Clovis and Tucumcari)
- Pediatric (Clovis)
- Nursing Leadership (Clovis)

We offer an excellent compensation and benefits package.

We are an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, age, gender, religion, sex, national origin, sexual orientation, gender identity, disability status, protected veteran status or any other characteristic protected by law.

For more information contact:
www.phs.org
(575) 769-7339 or (575) 769-7166
PHS is committed to ensuring a drug-free workplace

Graceland University
Respected, accredited and online ... a school with a great history!

- RN to BSN
- RN to MSN
- MSN - Family Nurse Practitioner
- MSN - Nurse Educator
- DNP - Doctor of Nursing Practice
- B.A. - Health Care Management

For more information call 800-833-0524 x 4717 or visit online, www.graceland.edu/OKBN

We are an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, age, gender, religion, sex, national origin, sexual orientation, gender identity, disability status, protected veteran status or any other characteristic protected by law.

For more information contact:
www.phs.org
(575) 769-7339 or (575) 769-7166
PHS is committed to ensuring a drug-free workplace

Graceland University
Respected, accredited and online ... a school with a great history!

- RN to BSN
- RN to MSN
- MSN - Family Nurse Practitioner
- MSN - Nurse Educator
- DNP - Doctor of Nursing Practice
- B.A. - Health Care Management

For more information call 800-833-0524 x 4717 or visit online, www.graceland.edu/OKBN

We are an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, age, gender, religion, sex, national origin, sexual orientation, gender identity, disability status, protected veteran status or any other characteristic protected by law.

For more information contact:
www.phs.org
(575) 769-7339 or (575) 769-7166
PHS is committed to ensuring a drug-free workplace

Graceland University
Respected, accredited and online ... a school with a great history!

- RN to BSN
- RN to MSN
- MSN - Family Nurse Practitioner
- MSN - Nurse Educator
- DNP - Doctor of Nursing Practice
- B.A. - Health Care Management

For more information call 800-833-0524 x 4717 or visit online, www.graceland.edu/OKBN
Nursing work hours for registered nurses in all roles and settings. Retrieved from http://www.nursingworld.org


Mitchell, G. (2013). Selecting the best theory to implement planned change [Master’s thesis, Queen’s University, Belfast].


Stimpfel, A. W., Sloane, D. M., & Aiken, L. H. (2012). The longer the shifts for hospital nurses, the higher the levels of burnout and patient dissatisfaction. Health Affairs, 31(7), 1240-1249.


Seeking RNs and LPNs

Full Time Day and Night Shifts

Outstanding shift differential $1,500 hire on bonus

To learn more contact: John Beaudrie, Administrator
1401 N. Leila • Guymon, OK 73942
jbeaudrie@vivage.com

RN MDS Coordinator For Long-Term Care

Being qualified Registered Nurses as an MDS Coordinator for our team of caring, dedicated professionals who desire to make a difference every day. We support our employees with a positive team environment, opportunities to grow, leaders who value our staff and competitive pay and benefits that reflect our commitment to our residents and staff.

Visit us at www.goldenagecuthrie.com make the short drive to Guthrie

EOE
I was not given the gift of diplomacy... I'm not good at it. So if you'll give me that grace in this article we'll get along fine. As my tires crossed the state line from Missouri to Oklahoma, I marveled at the beautiful, smooth road crying out for 100 mph. I have a strong romantic component, so the scenery was reminiscent of the old westerns and I could easily imagine beautiful, stately native men on perfect appaloosas. I was excited about coming to work in Oklahoma, to settle the Board of Nursing (BON) had taken requiring face-to-face classroom style teaching for 30 of the 45 hours, even for experienced midwives with full prescriptive authority in other states. I would like to thank the BON for taking this matter into their hands and judiciously solving it.

My story continues. I gave up. Being employed at a federal facility, I was able to choose to practice on my Michigan license and prescriptive authority. I was elected President of the American College of Nurse-Midwives Oklahoma Affiliate (give it to the new girl – no one else wants it) in this capacity I learned that a prominent insurance company (BCBS) refuses to offer midwife services as part of their insurance benefits. They just plain don't offer nurse-midwife services. CRNAs, CNS's and NPs are covered, celebrated and paid for by BCBS, but coverage for the APRN-CNM was a gap in consumer coverage. Go to the BCBS website for Oklahoma. You'll see pictures, bios, and addresses of NPs all over the state. You'll easily be directed to their offices and given a phone number to make your appointment. Look for midwives... Go ahead. Nada.

I immediately wrote three letters, registered, return-receipt to the President of BCBS in Illinois. They explained I am to deal with a contact in Tulsa. She and I began talking on the phone about one year before the time the ACA came out with mandatory midwife offerings on certain policies. She explained that due to the ACA they will pay for CNMs to see patients out of network at a co-pay of 40-50%. I asked what we have to do to graduate qualified CNMs. Don't even get me started on that issue. Because the players involved can easily restrain trade simply by not credentialing CNMs, leaving us with no MD able to make collaborative practice agreements, the need to deliver babies or give gynecological care – most of us practice in hospitals, not free-standing birth centers or homes. The ACNM (midwife) national organization for CNMs has tried to ascertain that problem in Oklahoma, providing BCBS with all information necessary to prove our safety, our consumer satisfaction and better birth outcomes (lower pre-term delivery rates, higher pre-term birth weights, increased satisfaction, higher breastfeeding rates, lower costs and less medical intervention). These aren't secret statistics. Now BCBS doesn't even bother to answer my phone calls, and I DO practice diplomacy when I call my contact in Tulsa. Certified Nurse Midwives are APRNs providing advanced nursing practice; no different from advanced practice nurses in other practice specialties. Respect for nurse-midwifery care in Oklahoma is almost insurmountable. If we are hindered by state statutes, reimbursement patterns as well as archaic hospital policies when attempting to provide cost-effective, safe, quality health care we put everyone at risk; consumers, all other APRNs...all Oklahomans.

The patient HAS to be the number one concern. Losing qualified CNMs to other states because of barriers to APRN-CNM practice and care is unacceptable. Most states in our nation have updated their practice acts to align with the NCSBN consensus model for APRNs. This has led to practice and policies that support access to care for consumers. In Oklahoma we can examine practice barriers to make our practice and care policies fresh and up-to-date. Will you "push" with us?

Suzanne Chriscico-Wilcox RNC, MS, APRN-CNM, ND, Homeopath, Certified Menopause Clinician, CCBE, President American College Nurse-Midwives, Oklahoma Affiliate

Calling ALL APRNs to “PUSH” WITH THE MIDWIVES!
“Diplomacy is seduction in another guise” – Benjamin Franklin

For more information call today:

Tulsa, OK (918) 665-1011 • Oklahoma City, OK (405) 842-7775
Springfield, MO (417) 886-1001 • Dallas, TX (214) 631-9200

Apply online at www.My-FirstCall.com

Drug testing required. Some restrictions apply.
Sheryl Buckner, PhD, RN, has been selected to receive the 2015 Midwest Nursing Research Society/National League for Nursing Doctoral Dissertation Grant Award. In a blind peer review, Dr. Buckner’s dissertation proposal, *The Effects of Attention on Academic Performance*, was considered outstanding, contributing to the work in advancing the science of nursing education. Her dissertation was also supported in part by a grant award by Sigma Theta Tau International, Beta-Delta-Chapter-at-Large.

In addition, Dr. Buckner is one of twenty-two distinguished nurse educators who have been selected for the ninth class of fellows for induction into the prestigious Academy of Nursing Education. Dr. Buckner was selected by the Academy of Nursing Education Review Panel for her contributions in innovative nursing education and community partnerships.

Both the dissertation award and the induction into the Academy of Nursing Education were formally announced at the 2015 NLN Education Summit in Las Vegas, NV. She is currently an Assistant Professor at the University of Oklahoma College of Nursing.

We are looking for candidates who are passionate about the art & science of Nursing Opportunities available for nurses of all career levels, from new graduate to tenured nurses.

- **Case Management** – Like to move things along – case management is the place to be
- **Emergency Services** – Need a challenge – come work in the busiest ER in the state – expanding services in Telmed, Chest Pain Obs, & Trauma
- **ICU** – Feeling the urge to grow – be a part of our ICU expansion including an additional Neuro ICU
- **Joint & Spine Center** – Career needing realignment – new unit focusing on joint replacement guided by the Marshall Steel Program
- **Senior Care** – Have a true passion for patients – this is where we want you to be
- **Surgical Services** – Like to open things up – work in state-of-the-art surgical suites with the only robotic-assisted surgical suite in the River Valley

**Perks**
- Clinical Ladder
- Shared Governance
- Bonus Opportunities
- Tuition Reimbursement

[Visit SparkHealth.com](http://www.sparkhealth.com) for more information.

**Contact:** Craig Blevins
1-800-304-3095 Ext 105, email: cblevins@beck-field.com

Looking for RN/LPNs to join our team of professionals.

13 locations in Oklahoma including OKC, Jenison, Ed., Elk City, Lawton and more.

Competitive salary, 401K, medical, dental, vision and PTO benefits.

Contact Monica Brownfield, Director
405-922-2034 or visit www.faithhospice.com

An Equal Employment Opportunity Employer: Females, Minorities, Veterans and Disabled.