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TONY TRIBBLE FOR THE ENQUIRER

Robin Wagner, MSN, RN instructs nursing students on infection control procedures and protective gear in a simulation lab at UC College of Nursing. "Keeping people healthy is dependent on their environment," Wagner says.

Infection control nurses step into spotlight

Sue Kiesewetter
Enquirer contributor

Every day Melanie DuBose begins her day by checking various databases used by Cincinnati Children's Hospital Medical Center to see if any patients have been admitted with or developed any infections.

A nurse by training, DuBose is part of a team of nine individuals that work to control the spread of infection in the hospital as well as providing information to colleagues, patients and families.

It is the team colleagues turn to when they have questions on precautions to take with highly contagious patients, what kind of personal protective clothing staff might need when caring for certain patients, or how best to clean a patient's room.

"We get questions every day – it might be a routine question on

personal protective equipment or whether someone can leave their room and go to the gift shop," DuBose said.

"We work collaboratively with all areas of the hospital and try to educate. We provide education on how to manage patients, infection control procedures and hospital policy."

It is an area gaining more and more attention in the public eye after outbreaks of influenza, measles, and even the recent Ebola outbreak in Africa pose new challenges to health care professionals.

"Keeping people healthy is dependent on their environment," says Robin Wagner, an associate professor in the University of Cincinnati College of Nursing, who serves as director of the nursing school's skills and simulation lab.

"We have to be educated on the

chain of infection. All the pieces have to be there for infection to occur."

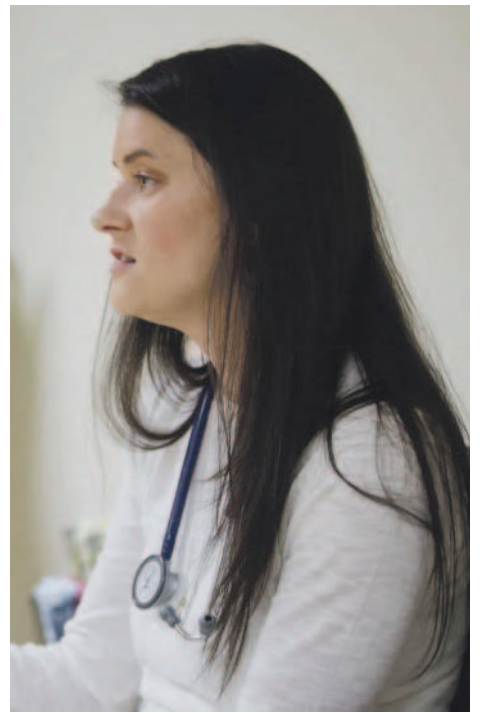
There are six parts of the chain, including the microorganism that causes the disease, where it lives and how it is transmitted and spread.

That information is an important part of what Wagner teaches her nursing students and the basis of what DuBose uses day in and day out, first as a nurse, then as an infection control practitioner the past three years.

"Times change and we might change the way we do things. We've gotten smarter or so we think – but to teach infection control ... we go back to the Florence Nightingale environmental model," Wagner said. We can model what we do after the things she learned in her practice."

One of the most effective and basic practices is good hygiene – washing your hands, Wagner said,

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TONY TRIBBLE FOR THE ENQUIRER

Amanda Rumpke, MSN, ACNP, RN, CCRN, CNP, of Mercy Health speaks with patients in the Chronic Obstructive Pulmonary Disease Clinic. Rumpke says patients need an opportunity to ask and receive answers to their questions.

Nurses integral team players in patient care

Sue Kiesewetter
Enquirer contributor

A collaborative approach to patient care is part of a growing trend in hospitals to ensure the patient gets the best, most consistent, care possible and reduce readmissions. Almost always, a nurse who has gone on to get additional certifications is a part of – and frequently leads – the team.

"Nurses, specifically, have a unique skill set and ability to be a patient advocate and supporter of patient progress," says Amanda Rumpke, a certified nurse practitioner who works in collaboration with doctors at Mercy Health Fairfield Pulmonary, Sleep and Critical Care.

"I live in both the medical and nursing worlds. Being a bridge between medicine and specialties is interesting."

In her role, Rumpke spends much of her time in the office coordinating care for the practice's patients and taking time to answer questions and educate. Oftentimes that involves pharmacists and respiratory therapists.

Patients, she says, frequently need more time than the 15 minutes allotted

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Palliative care a fast-emerging medical specialty

Val Previsch

Enquirer contributor

For patients suffering from chronic illness, such as heart disease or cancer, the symptoms and treatments can often feel overwhelming and interfere with daily living.

A new medical specialty, palliative care, is addressing this health care issue by enabling such patients to improve their quality of life. Palliative care nurses work as part of a team that helps patients find the right balance of care and comfort for their overall well-being.

Tracy Stephens, RN, MSN, APRN, a nurse practitioner who specializes in palliative care with St. Elizabeth Healthcare, says she chose to focus on palliative care four years ago after seeing critically ill patients suffer from the very treatments that were being used to help them.

"These patients were getting the appropriate treatments they needed from each specialist who was caring for them," she says. "But no one was coming in to ask about them as individuals and what they wanted."

Honoring the wishes of the patient is at the heart of palliative care, says Stephens. A palliative care team, which can include a physician, nurse, social worker, spiritual adviser and others, meets with the patient and his or her family. These meetings focus on how to improve his/her quality of life and on what the patient desires in the form of health care goals.

"It's about how their treatments affect their ability to live life," she says. "Can they return home to a normal base line."

Palliative care nurses help patients with solutions to problems such as pain, shortness of breath, fatigue, nausea, loss of appetite and other obstacles to living comfortably. The goal of palliative care is to help the patient in three ways: relieve physical and emotional suffering, improve patient-physician-family communication, and ensure well-coordinated care.

Stephens says that palliative care is not necessarily directed to terminally ill patients. Any patient with a chronic, debilitating condition can benefit from palliative care.

Nurses working in palliative care generally practice in a health care



Tracy Stephens, RN, MSN, APRN, specializes in palliative care at St. Elizabeth Healthcare. Studies indicate the specialty is one of the fastest growing trends in health care and is expanding beyond hospitals into community settings.

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setting, such as a hospital, and treat patients with long-term prognoses. These nurses usually pursue training in palliative care as a subspecialty, says Stephens.

Joy Buck, president of the Hospice and Palliative Care Nurses Association, says palliative care is expanding be-

yond hospitals into community settings as well, however.

"These programs may be offered in conjunction with a home care agency, hospice, accountable care organization (ACO), primary care, or hospital system," says Buck. "The increase in the number of older Americans, many of

whom have several chronic illnesses, is also a factor related to the increasing number of palliative care programs."

According to the Center to Advance Palliative Care (CAPC), based in New York City, this specialty is one of the fastest growing trends in health care. The number of palliative care programs in U.S. hospitals has risen at least 164 percent in just over a decade, from roughly 650 in 2000 to over 1,700 in 2012.

The number of Americans with chronic conditions is expected to double over the next 25 years, according to the CAPC. Palliative care will be an integral part of treating such patients in the future and improving their quality of life.

For more information about palliative care availability, go to getpalliativecare.org, for a directory of local organizations that provide this type of care.

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St. Elizabeth
HEALTHCARE

Team players

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for most physician appointments, or they feel too intimidated to ask questions.

“We recognize the patient really needs an opportunity to ask and receive answers to their questions,” Rumpke said. “We develop a relationship with them so they don’t feel like they’re alone. Sometimes they express concerns about financial worries about medicine and we try to help.”

At Bethesda North, once a patient has been seen by a physician and admitted to a floor with a diagnosis, a team begins gathering information. Members can include a clinical nurse leader, pharmacist, dietician, care managers, social workers and therapists, depending on the patient’s condition.

Heather Nordstrom, a clinical nurse leader, sees herself as a gatekeeper of information for her patients at Bethesda North. Nordstrom is part of a team that gathers, updates and shares information about 10 to 15 patients once they’ve been seen by a physician, diagnosed and admitted to a floor.

“I’m meeting every day to discuss the patient with (the physician) and the family,” Nordstrom says. “There are a lot of people that look over the chart and the patient. Our team keeps the consistency (of care) going day to day.”

Similarly, every morning at 9 Pam



Lynne McCabe BSN, RN, CCM (second from left), director of community Care Coordination programs for Mercy Health, discusses a patient’s care and progress with team members, from left: Nicole Streeter, Care Coordinator support specialist, RMA; Jamie Hinman, MSW, LISW-S, behavioral health clinician; and Erica Kelly-Proud, Care Coordination support specialist.

Bolton goes on rounds in the medical surgical intensive care unit at Good Samaritan Hospital.

The advance practice nurse is part of a multidisciplinary team that evaluates 10 to 25 patients in the ICU and puts together a plan of care for

the day.

“When the patients are presented to us we look at them as a total picture, manage them, set the plan for the day and adjust it as needed,” said Bolton, who holds certification as a critical care clinical nurse specialist

and acute care nurse practitioner. “We have specific documents to communicate that care. Everyone on the team has access to the documents. There is a ‘to do’ list for the day ... we update it as needed.”

Infection control

Continued from Page 11

which goes back to Nightingale’s Notes on Nursing book, published in 1859 in England; a year later, in the United States.

Another is wearing personal protective gear – gowns, masks, gloves, eye protection – when handling blood or body fluids.

Wagner also reminds her students that microorganisms can be transmitted by too long pants that drag on the floor or their shoes.

To illustrate that point, she puts Glo Germ powder on their hands in their first lab.

When black light is shone on it, it shows germs.

After students wash their hands as taught, the powder is put on their clean hands once again and put under the black light.

“We can see how good they did washing their hands. It gives them the idea where germs hide on your hands,” Wagner said. “What we hit very hard on is the basic concept.”

Powder put on the floor does the same thing to show germs on shoes or pants that touch it.

“If you understand the fundamentals, you can move forward,” Wagner said. “This concept is not new to nursing.”

DuBose agrees. She learned those basics and now reminds others of them as part of her role as an infection control practitioner.

A year ago, DuBose received certification in infection prevention and control from the Certification Board of Infection Control and Epi-



Melanie DuBose, BA, BSN, RN, CIC, infection control practitioner at Cincinnati Children’s Hospital Medical Center, left, confers with colleague Julie Fugazzi, RN, CICU prior to hanging posters on tips to prevent the spread of germs.

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ADDITIONAL RESOURCES

- » Certification Board of Infection Control and Epidemiology, Inc.: www.cbic.org
- » Association for Professionals in Infection Control: www.apic.org
- » Notes on Nursing, Florence Nightingale: www.digital.library.upenn.edu/women/nightingale/nursing/nursing.html or www.gutenberg.org/ebooks/17366

demiology, Inc.

To get the certification, DuBose had to work two years learning her craft and taking courses before taking the certification exam.

“You learn as you go. We’re investigators trying to put the pieces of the puzzle together. We’re an in-

tegral part of the hospital. We work collaboratively with all areas of the hospital,” DuBose said.

“It helps to have a nursing background. You understand the process, the lingo. We provide education anytime there’s an outbreak of infections or disease. We provide infor-

mation on how to stop it – interrupt the transmission from person to person.”

Other tasks the team works on include employee health, safety, reviewing patient charts, interview patients coming in, checking their travel history, and similar duties.

“It’s all about trying to brainstorm and think about people’s behaviors and how we can best protect our patients and the institution, DuBose said.

“It’s very interesting – unlike anything else I’ve ever done. I learn something new every day.”

History of National Nurses Week

National Nurses Week, celebrated every year from May 6-12, has a long, rich history.

Officially enacted by President Richard Nixon in 1974, the weeklong event is a celebration of all that nurses do to help keep the citizens of the United States healthy. And as of 2003, National School Nurse Day is celebrated on the Wednesday within National Nurses Week each year.

Nurses certainly deserve their share of the spotlight, and for a much longer time period than the allotted week. From supporting physicians in surgeries to performing home visits to the elderly, nurses go above and beyond their expectations to consistently deliver quality care.

Here's a quick breakdown of the most historic dates in the progressive evolution of National Nurses Week, as provided by the American Nurses Association.

A time line

1974 – In January, the International Council of Nurses proclaimed that May 12 would be “International Nurse Day.”

1974 – After many failed attempts by various activists and even Congress, President Nixon issued a proclamation designating “National Nurse Week.”

1982 – In February, the American Nurses Association Board of Directors formally acknowledges May 6 as “National Nurses Day.” The action affirmed a joint resolution of the United States Congress designating May 6 as “National Recognition Day for Nurses.”

1996 – The American Nurses Association initiated “National RN Recognition Day” on May 6, to honor the nation's nurses. The group continues to encourage its state and regional



SILKSTOCK-FOTOLIA

nurses associations to acknowledge May 6 as “National RN Recognition Day.”

1997 – The American Nurses Association Board of Directors designated May 8 as “National Student Nurses Day.”

2015 – Hospitals and health care agencies everywhere are preparing for another ledger of National Nurses Week events and advocacy efforts. Check in with your local nurses association for information on how you can get involved with local happenings.

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Nurses embrace technology to work smarter for patients

Sue Kiesewetter
Enquirer contributor

When nurse Scott Richard Greenwald started working in Cincinnati Children's Hospital Medical Center's pediatric intensive care unit (PICU) about 10 years ago, patient charting was often done with paper and pen.

Today he can pull up a patient's chart through the Epic electronic health record system. Scanners are used to make sure patients get the right medications.

And a technology-based positive patient-identification system that uses scanning makes it nearly impossible for lab specimens to be misidentified.

"Health information technology such as Epic, clinical decision support systems and smartphone apps are there to benefit the patient and the whole health care team," Greenwald said.

Through the Epic system nurses, physicians and other health care staff members can enter routine patient information, test results and observations that can be accessed instantaneously by anyone on the patient's care team.

"In many organizations electronic health records were in their infancy in the early 2000s," said Debbie Hayes, vice president and chief operating officer for Christ Hospital. "Now they are a standard tool used in hospitals as well as ambulatory clinics across the United States."

While Greenwald still spends about two-thirds of his time providing patient care in the PICU, he is part of an informatics services team at Children's that discusses, pilots and educates colleagues on new technologies and how it can be applied.

"We bounce ideas off each other," said Greenwald, who is finishing his master's degree in nursing informatics. "We often test things in PICU before going live through the hospital – we're small enough with excellent nurses who are OK with change."

Children's began implementing its first electronic record system in 2001 and converted to its current system in 2010, said Allison "Ali" Morin, a registered nurse serving as Children's interim chief informatics officer for Patient Services.

The system now allows patient records to be accessed by other hospitals, physicians and health care providers that also use the Epic system.



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Scott Richard Greenwald, RN, of Edgewood reviews patients' data obtained from the Epic electronic health record system.

Another part of Epic allows the patient or caregiver to access their records through Epic My Chart.

"We're very much about transparency. The whole team is aware of what's going on with the patient," Morin said. "The family is just as much a part of the care team as the doctor and nurses. It puts minds at ease and families are more satisfied."

Hayes said the rise in new technologies is also changing health care.

"The entire manner in which care is being given is under change. Our workforce is required to be literate in so much more as tools to care for patients emerge. Those tools involve technology," Hayes said.

"The transformation of health care will, in part, be enabled by our ability to utilize the technology available to us," Hayes said. "We need to challenge ourselves in the industry to find

and develop technology that will enable further transformation."

As an example she cited the emerging practice of electronic health visits instead of face-to-face visits at a doctor's office, hospital or other setting.

Morin says she is working with undergraduate programs to integrate informatics, computer skills and technology into the nursing curriculum. Oftentimes it includes simulation models.

"From the technology standpoint we need to create a curriculum that teaches informatics from the beginning in nursing schools," Morin said. "My goal is to make the nurse's job easier by using technology – it's the marriage of hands-on care and leveraging technology so nurses can work smarter and more efficiently for the patient."

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PENNY BOWDEN

Cincinnati Children's Hospital Medical Center

As a home care visiting nurse, Penny Bowden embodies the professionalism and compassion necessary to treat a broad range of patients in a variety of conditions. She is lauded for her attention to detail and dedication to always ensuring that she has the correct materials prepared for her patients—regardless of the language barriers imposed by a culturally diverse base of clients. For the many nurses Penny has mentored, she serves as an example of both the sensitivity needed to keep patients at ease, and the thoroughness needed to perform the job effectively. Penny's peers praise for her willingness to go the extra mile for both her patients and her fellow nurses, and they note that she has consistently demonstrated this through her work and her interactions with colleagues.



ASHLEY LAUTAR

The Christ Hospital

As a leader on the Acute Care for the Elderly—ACE—Ashley's advocacy for hospitalized older adults has resulted in numerous significant contributions including a two-day reduction in stay, reduced 30-day readmissions and near elimination of falls. Described as operating "at two speeds on the ACE unit: running and sitting," Ashley is known for her ability to balance the need to quickly respond to emergencies while also taking the time to sit and show compassionate care for her elderly patients. One nominator praised Lautar's commitment to both her patients and coworkers, saying "Ashley is a team player, and views every interaction with patients, families and team members as an opportunity to serve." Ashley is dedicated to improving the nursing care for individuals, families and communities, and demonstrates her commitment through effective collaboration with peers and respect for patients.



JEAN ANN "JEANIE" FOLEY

St. Elizabeth Healthcare

Jean Ann "Jeanie" Foley's work is seen throughout Northern Kentucky and beyond. As program manager for the cardiovascular mobile health unit, she has played a major role in increasing the availability of cardiovascular screenings in our community. Under her direction, the unit offered 100 free educational events in 2014, expanded its reach into outlying counties, and provided 4,949 screenings. Jeanie's creativity, flexibility, knowledge and accountability have helped drive the expansion of the mobile unit's efforts to combat heart disease—but it is her compassion and dedication that has earned the admiration of her peers: "Her positive and can-do attitude have allowed her to take the program to the next level." From managing Mobile Health Unit programs and establishing community partnerships to writing grants to help secure funding, Jeanie has been instrumental in building a program that helps combat the leading cause of death in Kentucky.



VICKI RIDDLE

The Christ Hospital

Dedicating her entire career to the Christ Hospital Health Network, Vicki Riddle has interacted with thousands of people and positively impacted the lives of patients, families, nurses and physicians in immeasurable ways. Through her 37 years as a Registered Nurse, she has maintained the highest level of commitment to her work and to those she serves. In her current leadership role of the Medial ICU, she establishes a structured foundation to the work environment that provides clear expectations for her staff members and standards for patient care. For her constant dedication to setting a good example and compelling others to follow, Vicki is described with the analogy of a mother's love – "committed, unwavering, kind, caring, tough, honest, direct, dedicated, non-judgmental, immeasurable and many times unappreciated for the true value in a person's life."



JASON HUFF

University of Cincinnati Medical Center

The impact Jason Huff's management has had on his department is best described as transformative. Praised for his organization, respect and leadership in his role as Clinical Director of Transplant Services, Jason has helped establish policies that empower his nurses to work more effectively to ensure that patients are receiving the best care possible. Described as "truly the role model for nursing excellence and leadership," Jason has not only helped his nurses operate efficiently, he has helped mentor them to lead and encourage others. These changes to the department's operations have had positive effects on patient care. One nominator reflected on this impact, saying, "Our patients are happier now because of the changes he implemented." Jason's leadership is a profound example of the impact a manager can have on both employees and patients, and the universal admiration expressed by his nominators is truly inspiring.



NOEL SMITH

Cincinnati VA Medical Center

With nearly 20 years of service at the Cincinnati VA Medical Center, Noel is known throughout the facility for his high standards, unfaltering work ethic, nursing expertise, professionalism and dedication to delivering the highest quality healthcare for our veterans. This is reflected in his service both inside and outside his department, serving as chair of the Falls/Restraints Committee and active member of several other committees and councils. Noel truly cares for his veteran patients and shows it daily. He finds time to listen to their stories, pray with them, or simply sit in silence and be present in the moment. The respect he has for the patients goes well beyond expectation. He thanks every single veteran for their service in the military and can be heard saying, "Now I am here to serve you." His dedication to and his concern for our veterans is genuine and heart-warming.

Florence Nightingale

The "Founder of Modern Nursing", Florence Nightingale was born on May 12, 1820, her parents purchased a home in Embley Park near Romsey, England. Despite her parents' objections, Florence pursued her desire to be a nurse. She traveled to study European hospitals and worked as a nurse in France and Germany. When the Crimean War began in 1851, Florence Nightingale organized a group of nurses and took them to the battle front in Russia. There she found that nearly half the sick and wounded soldiers were dying because of primitive sanitation methods and lack of nursing care. As a result of the nursing methods and strict sanitation she set up, the death rate greatly decreased. To describe the reduction in deaths, she drew ornate statistical diagrams known as coxcombs which indicated her prowess as a nurse researcher. Upon her return to England, she started the Nightingale School of Nursing at St. Thomas Hospital, London. The opening of the school marked the beginning of professional education in nursing. During a number of other wars, including the American Civil War, She was consulted on questions concerning the organization and operation of battlefield hospitals. Florence Nightingale died at her home in South Street, London, on August 13, 1910. She was buried on August 20, 1910, at St. Margaret's Church, East Wellow, England. The tombstone reads: F.N. Born 12 May 1820 • Died 13 August 1910

2-year degree programs and 1-year certificates can open doors to in-demand careers in health care technology

BrandpointContent

Tiffany Fair initially ruled out a career in health care. She assumed most available positions were for nurses, and she knew she could never get past her fear of seeing blood. Fair's outlook on the industry changed quickly when she learned about the growing field of health information technology (HIT).

"HIT intrigued me because it enables individuals to play a key role in the health care system outside of the traditional clinical setting," she says. "The most satisfying career aspect of HIT is that it continues to evolve as new technology is introduced in the marketplace. That means my knowledge and skills are always changing and expanding."

Fair recently earned an associate degree in HIT from DeVry University and now works for a large health information management company processing patients' medical records for legal or personal reasons to ensure the information is valid and complies with state and hospital laws and bylaws.

The need for professionals in roles similar to Fair's is expected to rise as experts anticipate 11.7 million new patients will enroll in health care coverage in 2015 through provisions outlined in the Patient Protection and Affordable Care Act.

"For those who want to quickly



PROVIDED/BRANDPOINTCONTENT

The need for professionals in health information technology roles is expected to rise as experts anticipate 11.7 million new patients will enroll in health care coverage in 2015 through provisions outlined in the Patient Protection and Affordable Care Act.

enter the workforce, an associate degree in HIT provides the education and skills preparation needed to break into emerging health care professions that provide career mobility and fulfillment," says Dasantila Sherifi, professor and HIT program chair at DeVry University.

The U.S. Census Bureau projects that the population of Americans 65 and older will more than double by 2060. An aging America will send more health care workers into retirement, and expand the population that

requires additional primary care services to address chronic health issues. Workforce projections and population shifts signal emerging health care career opportunities in a variety of roles, including:

» **Health information technicians**

Individuals who are highly organized and detail-oriented can thrive in a career as a health information technician. These professionals are responsible for organizing and managing health information data in both

paper and electronic systems, as well as coding and categorizing patient information for clinical care, research and insurance reimbursement.

Demand for health information technicians will continue to rise with growing use of electronic health records by hospitals and physician's offices, especially in the areas of data analytics and population health. Further compounding this demand is the pending implementation deadline of the new version of the International Classification of Diseases, which expands the number of diagnostic codes from 14,000 to 69,000.

» **Medical and clinical technicians**

A career as a medical or clinical technician requires both analytical and scientific skills for procedures and processes that can have significant impact on patient health. Responsibilities include the study and analysis of blood and tissue samples to determine normal and abnormal findings. Technicians are also accountable for logging data into a patient's medical records and discussing results of laboratory tests and procedures with physicians.

The growing aging population and diagnosis requests for chronic diseases such as diabetes and terminal illnesses like cancer means careers in this field will continue to rise. Ac-

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Xavier University
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In-demand careers

Continued from Page 8I

According to the Bureau of Labor Statistics, employment within the medical records and health information technician field is projected to grow 22 percent from 2012 to 2022.

» Radiologic and Magnetic Resonance Imaging (MRI) technologists

Americans are living longer, so their total lifetime health care needs are rising. Medical conditions such as broken bones and fractures caused by osteoporosis are common and frequent, as is the diagnosis of terminal illnesses, all of which can require imaging for correct diagnosis.

In these instances, radiologic and MRI technologists play a role in patient diagnosis and work closely with physicians to utilize X-rays, MRIs, computed tomography and other high-tech equipment to perform diagnostic imaging. Opportunities in the field are projected to grow 21 percent and 24 percent for MRI technologists and radiologic technologists, respectively.

To secure a position in these fields, individuals should identify schools that offer degree programs or certificates that can prepare them for the constantly evolving field of health care and increase their marketability in the workforce. Certain states or employers may also require professional certification or licensure. “DeVry University’s medical billing and coding certificate can be completed in one year of full-time, year-round study, allowing prospective HIT professionals to swiftly enter the field with the knowledge and skills preparation required to function as an entry-level coding specialist,” says Sherifi.



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TONY TRIBBLE FOR THE ENQUIRER

First-year pre-nursing student Chase Kelly McDonald in an Anatomy and Physiology lab at NKU. By spring 2016, McDonald plans to become licensed as a Certified Nursing Assistant – mid-way into a four-year program – which she will use as a credential to obtain an internship between her second and third year of nursing school.

Choose your path to a nursing career

Val Previsch
Enquirer contributor

Do you dream of a career in nursing? If so, there are some things to think about long before you fill out a college application.

Nursing is a popular career choice and for good reason. There are many options for nursing careers, from clinical work in a hospital or medical office, to administrative jobs and even sales positions. Nursing is a launching pad for a multitude of job choices in the health care industry.

One of the most sought-after paths to a career in nursing is to attend an accredited nursing school at a four-year university such as Northern Kentucky University. This leads to a Bachelor of Science degree in nursing (BSN) and a wide choice in future jobs.

Chase Kelly McDonald of Crestwood, Kentucky, who just accepted a spot in Northern Kentucky University's Department of Nursing, says her journey to this point began many years ago and included a lot of preparation. It first began with a budding interest in health care during junior high.

"I had a childhood friend who had cystic fibrosis," she says. "Her mom was a nurse. Watching her dedication to her daughter helped inspire me."

McDonald says her passion about becoming a nurse influenced her choices in high school. She maintained good grades and took courses in math and science, such as anatomy and biology, to help

prepare her for the future academic challenges she would face in nursing school.

She also took advantage of opportunities to volunteer with programs that allowed her to experience what it was like to be around a health care setting. One such course allowed her to work as a nurse's aide. She also volunteered at a local hospital and attended a nursing camp offered at NKU before she graduated from high school.

Her efforts paid off with a scholarship to attend NKU and admission into the competitive nursing program.

"I really worked closely with my guidance counselor in high school," she says. "You have to look at the big picture, and it helps to start early."



Dan Bisig

Dan Bisig, CEO of College and Beyond, a college scholarship and admissions counseling firm, says McDonald did all the right things – from

starting her preparations at a young age to seeking out the best scholarship opportunities with her high school counselor.

When it comes to getting a professional degree such as nursing and affording college, Bisig says it is never too soon to start planning.

"Everyone should have the money talk as early as possible," he says. "Students should find out long before their senior year how much they will be expected to pitch in

toward their education and how much they can expect from other sources, like mom and dad."

He also says it's smart to set yourself apart from the pack, as McDonald did with her many volunteer activities.

"Students are all starting to look the same – good grades, good test scores. You need a way to stand out."

But don't forget those basics like good grades, Bisig adds, because those grades and test scores are one of the best ways to secure merit scholarships from most universities, a good way to lower your college costs. For additional scholarships, he says students need to become detectives and search diligently for other opportunities.

"You have to get creative," said Bisig. "You really need to think like Columbo (the old detective show starring Peter Falk) to find the money that's available."

Opportunities for those not ready for a four-year university

For those who didn't plan ahead or who don't feel ready for the financial commitment that comes with a four-year degree, there are still options. One-year and two-year nursing programs are available through many local community colleges and hospital programs. These are less expensive and can be stepping-stones to a higher level degree at a four-year university.

Denise Rohr, associate dean with the Bethesda School of Nursing at

Nursing as a second career

Val Previsch
Enquirer Contributor

At an age when most people are settling comfortably into mid-life, Bevin Kirsch decided to take on a challenge that many would find daunting – an entirely new career. She decided to go back to school to become a nurse.

Kirsch enrolled in Beckfield College and is working toward an associate degree in nursing. She is hoping to land a job in oncology when she graduates, something she developed an enthusiasm for while working as a phlebotomist collecting blood plasma for cancer patients in a previous job.

"It means a lot of sacrifice taking on school at this point in my life, but my family is very supportive," says Kirsch, 46, of Anderson. "I would be honored to be able to help cancer patients."

While Kirsch says she was drawn to nursing because of the high-touch, care-oriented nature of the field, she says she was equally drawn to the fact that nursing jobs are plentiful and relatively stable compared to other sectors of the economy.

"The job stability is definitely important," she says. "Not many fields offer that these days."

Kirsch is one of a growing number of mature adults who are heading back to school to pursue degrees in nursing, say experts. Like her, others are also drawn by the lure of meaningful work and plentiful jobs that could lead to stable employment.

Robert Rosseter, chief communications officer for the American Association of Colleges of Nursing, says that accelerated degree programs for adult learners in nursing are the fastest growing segment of nursing education.

"The greatest growth over the past 10 years has been in these accelerated programs," says Rosseter. "We've gone from 31 accelerated programs in 1990 to 293 today."

"What we hear is that folks see opportunity in nursing that they don't see elsewhere," he says. "After they've been out in the workforce they may decide to do something different, something they feel makes a difference. I think they see nursing as that type of job."

Kelly Simmons, chief academic officer at The Christ College of Nursing, says she has seen many new students in their 40s or even 50s enrolling.

"Many of these people see nursing as a safe choice," she says. "Job security is a high priority for them and they feel nursing offers that security."

New nurses with the life experiences that these students bring are a positive addition to the field, however, she says.

"They aren't so green," says Simmons. "They can relate to patients and co-workers well because they've

Second career

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been out there a while.”

Many non-traditional nursing students already have some type of college degree, so they can be finished with training in as little as 18 months, says Simmons. This means only a short time out of the workforce. Local hospitals can rely on them to fill new openings quickly.

Deborah Smith-Clay, dean of nursing at Beckfield College, says second-career nurses may help ease a scarcity of nurses in many areas of the country.

“We still have a shortage of nurses,” says Smith-Clay. “These new nurses will help to solve that shortage.”

She says adult learners also fill another critical need – diversity.

“Many of our non-traditional students are men,” she says. “More men seem to enter nursing as a second career. Men tend to gravitate toward more rigorous areas, too, like emergency room and ICU jobs. So diversity is welcome.”

The one common trait all nursing students must have, however, says Smith-Clay, is a strong sense of discipline and a desire to meet the intense academic requirements.

“This is not for everyone,” she says. “Most people have no clue how difficult it’s going to be. You have to be very motivated, put in



TONY TRIBBLE FOR THE ENQUIRER

Bevin Kirsch, left, Beckfield College freshman nursing student, with Kim Carpenter, RN, BSN, simulate the resuscitation of a newborn baby. Kirsch developed an enthusiasm for nursing while working as a phlebotomist collecting blood plasma for cancer patients in a previous job.

lots of time to study and be able to multitask to juggle the demands on your time.”

Kirsch says she’s already seen a “weeding out” from her original starting class, down to roughly 30 from about 50.

She says she is willing to put in the study time in order to have a job she enjoys for many years to come.

“I’m sure I’ll be working for another 20 years and I want to do something I love to do,” she says.

Paths

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Cincinnati State Technical and Community College, says students who don’t feel ready for a four-year university have other opportunities.

They can choose either a one-year certificate program to become a practical nurse, or a two-year associate degree program that will give them the title of registered nurse.

For both of these programs, Rohr says students are first required to become State Tested Nurse Aide (STNA). This gives them an opportunity for real-world experience in caring for patients at the most basic level so they understand what the job entails.

“We have a lot of students who think they want nursing, but they’ve never actually worked in a health care setting,” says Rohr. “The STNA gives them a chance to see what it’s like so they don’t make a mistake when it comes to their career.”

Rohr recommends that high school students considering one of these degree programs take the same science and math courses as students pursuing a four-year university education. If they didn’t, however, she says Cincinnati State offers courses that allow them to catch up and prepare for the challenging curriculum that comes with nursing.

In addition, Cincinnati State has articulation agreements with several area universities so that coursework credits will be accepted toward a BSN degree. Some of these schools include the University of Cincinnati, Mount St. Joseph University and Wright State University.

For more information about education and training for a career as a nurse, go to nursingworld.org.

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