

Kara Aukes

As the eldest grandchild on both sides of my family, I had the privilege to have most of my great-grandparents alive through much of my childhood. I watched my mother and grandmother take care of them over the years; they cleaned for them, ran errands, took the garbage out once a week, did laundry, and whatever other odd jobs my great-grandparents needed. Eventually, they needed more help than what my mother and grandmother could provide, so, one by one, they were admitted to the local nursing home. My aunt was, and still is, a licensed practical nurse at the home, and I went to work with her at least once a week to visit my grandparents and volunteer in the adult daycare. When I was sixteen, I took the nursing assistant course, and have been employed in long-term care ever since. The elderly are a unique population, and caring for them has been very rewarding.

I am currently the director of nursing at Parker Oaks Communities, but before coming to this facility, I had been with St. Lukes Lutheran Care Center for eight years. In the last decade, I have seen many changes come about in long-term care. One such change is the prevalence of elderly seeking primary health care from nurse practitioners rather than physicians. In fact, this seems to be a common trend in the healthcare world in general. I find it interesting, therefore, that there are no nurse practitioners in my immediate area that come the nursing homes to round on patients. Instead, the elderly have to travel to the clinic for a visit. My hope is to further my education and obtain a masters degree as a nurse practitioner, with a focus in gerontology. I hope to be able to give back to community through being available for nursing home rounds and home visits, as well as clinic availability.

I have several residents in my facility who love cats. They have pictures of kitties from magazines, cards, posters, and such decorating their walls. Our physical therapist has a small dog she brings to work with her on occasion, but nobody has ever brought a cat. I recently took in an abandoned kitten, even though I have never been much of a cat lover myself. The kitten had such a mild disposition, I knew it would do well with my residents. I started bringing her to work with me for half of a day once a week. We not only visit my residents who are notorious cat fans, we stop to see everyone. Even the residents with severe dementia will pet the kitten. It's wonderful to see the joy such a simple visit can bring. Their eyes light up and they smile whenever they see Tabby (the kitten) coming down the hall. It's very easy to get caught up in the medical aspect of long-term care; we are so consumed with diagnoses and mediations that sometimes we forget about the importance of providing happiness. Pet therapy has been a wonderful addition to Parker Oaks.

I would hope that I have positively impacted my facility in many ways, but the one way I take the most pride in is teaching. I love to teach and find every opportunity to do so. My staff tell me my annual all day inservices are the best they've ever had. They might be buttering me up, but I like to think they're honest. My favorite teaching method is acting. My fellow department heads and I act out short skits about hypothetical scenarios in the nursing home. Then, we quiz the staff as to what the appropriate action would have been, or what could have been done to provide a better ending to the scenario. I also have an annual scavenger hunt that incorporates important landmarks in the facility, such as the AED and fire panel. I believe in finding fun, innovative ways to teach. The more hands on the staff can get, and the more they enjoy the learning experience, the more information they are likely to retain.