Once we left the paved road, the vastness of the landscape began to reveal itself. Angela Cooper, BSN, RN, the public health nurse who covers this area seems relaxed as she navigates the variations in terrain. Billows of dust, kicked up by the truck’s oversized tires, are all you can see when you look out the back window; to the sides and ahead, open space from horizon to horizon. After about 45 minutes we came to a fork in the road. There are no street signs out here. Angela takes the dirt road to the left. I wonder, how can she possibly know where she is, or which way to turn? I don’t say anything. I can see she is in her element.

Those big tires came in handy several times as we crossed a stream or made our way up steep inclines or negotiated areas of the road full of boulders. My inexperienced sense was we could not make it through some parts of the road, but Angela never hesitated, never grabbed on the steering wheel with white knuckles, what I imagined I would do in her position. Angela is helping us understand her job as a public health nurse by letting us ride along as she visits patients who live in remote areas of the Navajo Nation Reservation in Arizona.

The day before, while speaking with Angela, she described her work with tribal elders as an honor. There is a quality of deep respect that radiates from her as she interacts with her patients. She spoke with us about the importance of honoring the belief systems of the people she serves. She does not push western medicine, but while showing respect for those who may believe in the old ways or the guidance of a Medicine Man, Angela will try and educate her patients on the benefits, say, of taking a heart medication or an antibiotic for an infection.
In this remote part of the world, there are very few visitors. Lynette Bonar, MBA, BSN, RN, COO of the Tuba City Regional Health Care Corporation, told us the unemployment rate on the Reservation is around 40%. This forces young adults into neighboring cities for work, leaving many of their elderly parents alone. One of the major concerns Lynette is trying to address is the lack of resources for the elderly on the Reservation. If an elder needs assisted living or a nursing home, they have to leave the Reservation and placed in towns far from what is often the only home they have ever known. Lynette, along with her colleagues, are trying to get assisted living and a nursing home built on the Reservation so that their elders no longer have to be displaced outside the community.

**Critical Nursing Services**

Thanks to our much-appreciated guide James Bilagody, we were able to speak with his mother, one of the Navajo elders. As James translated from Navajo to English, she spoke of the important role that nurses play in meeting the needs of elders like herself, but especially those who live alone and in isolated areas. She shared her thoughts on the importance of the nurses’ visits and her concerns that if services are cut and resources become scarce, the elders will suffer. Angela tells us many of the patients she serves are in their 70s, 80s, even 90s and often live alone, far from the community and resources.

As we watched Angela in action, the complexity of the situations she manages became more and more clear. At the same time, she has a calming and reassuring way about her, never hurried, deeply caring, one can see she has an impact on many levels when she makes a home visit. I wondered if her patients realize that she is a highly educated and highly trained nurse who has chosen to devote her life and skills to this population or if they see her like a daughter who has come to visit. Perhaps some of both. Being out on the Reservation with Angela we witnessed the mingling of two worlds. One is the life of the professional nurse and the other a simple life with which most Americans are unfamiliar. One without running water, electricity, telephones, iPads, Internet, and so many other things that are a part of everyday life to so many.

After spending 6 hours wandering through spectacular vistas, vast open space, and discovering an occasional small dwelling, homes to many Navajo and Hopi elders, it was easy to see the importance of the work these nurses do. However, visiting patients in remote areas is only a part of the job. Ann Hilt-Garro, MPH, BSN, RN, who oversees the team of public nurses at Tuba City Regional Health Care Corporation, understands the complexities of public health nursing and the uniqueness of being caregivers on the reservation. The nurses who work in her department need to have a wide range of knowledge and experience. Their practice covers everything from pregnancy, newborns, immunizations, disease management, nutrition counseling, and education, working with all age groups from babies through old age. They have to deal with all kinds of situations, assessing living conditions, emergency care, drug and alcohol abuse, domestic violence, rallying resources to get someone to a doctor’s appointment, to fix a broken window or haul water and firewood to an elder in need. They even need to know how to fix a flat tire or free a truck that is stuck in the mud.

Rajean Victor, RN, who has been a public health nurse in Tuba City for 23 years, continues to be inspired by the needs of the people she serves. As was the case with each nurse we met on the team, she has a gentle way about her, reflective, a calmness that one can imagine inspires confidence in her patients. Rajean spoke of the need for education, advice, and encouragement. She spoke of the importance of getting to know the people she serves and understanding their unique individual needs. An important part of their job, she says, is helping patients learn to help themselves. To do this successfully, one must understand the wholeness of the person; spiritual, mental, physical, and emotional, all aspects of the person. She shared with us her concern that nursing is straying away from this kind of holistic view of the patient. Rajean emphasized the importance of understanding that we all have belief systems and these are very connected to hope and self-healing, therefore important for the nurse to honor.

In just two days of being among this extraordinary team of public health nurses who serve the Navajo Nation, it became apparent there is much to be learned here. Within their routine days, the conditions they work in, the situations they face, and the many ways they find to meet the needs of the people they serve, is a wealth of knowledge that may well translate into solutions for some of the challenges our nation’s health care system is facing.

**A Wealth of Knowledge and Experience to Inform Change**

As more and more care is delivered outside the walls of hospitals, as our focus shifts to models such as accountable care organizations, we will face many challenges in redesigning both care delivery and the optimal use of our workforce. The wisdom and experience of these and other public health nurses, who work far from the typical hospital setting, may well hold some of the keys to how we can successfully plan for and navigate the future of our shifting health care system.

One example is rethinking about how specialized nursing has become. As acute care settings focus mainly on those who are critically ill, one can imagine the need for even deeper specialization. On the other hand, as more care delivery moves back out into the communities, more nurses will be working out-
side the hospital and there will be a growing need for generalists. The demand for nurses who can address a wide variety of situations and work with a wide range of ages will increase. Along with nurses spending more time in the community will come the necessity for a new level of autonomy and resourcefulness. The resources that acute care settings offer will no longer be close at hand for many nurses and patients.

With reimbursement changes, hospital units will move from revenue centers to cost centers. Organizations will be financially incented to keep people well and out of the hospital. This will place new emphasis on education of populations, groups, and communities, which in turn will create expanded opportunities and new demands for nurses. As our emphasis shifts from illness care to a health risk management model, we will need deeper understanding of the values, lifestyles, cultural influences, and belief systems that influence and inspire people towards self-care and wellness. Nurses who have had a focus on wellness and keeping people healthy may find increased interest in their services, opening all kinds of opportunities for entrepreneurs.

As more of the nursing workforce moves outside the walls of the hospital, competencies in autonomy, clinical judgment, decision making, and communication will increase in importance. Along with safety and quality implications, this may also influence changes in nursing education, job requirements, hiring, and measuring performance. In addition, there may be implications around how new nurses are oriented and how they get the experience needed to function in more independent roles. During our time on the Navajo Nation, we learned that their nurses had a wide range of backgrounds and experience to draw upon including labor and delivery, postpartum, burn units, med-surg, and intensive care. It is hard to imagine how a nurse can be effective in these complex roles out in the community without the strength of these kinds of experiences to rely on.

As we consider scenarios of how the work of nurses will change, we also need to consider how technology needs to change to support their new world. How will we help meet the demands for information and informed decision making in remote locations? What will be the role of the family and the patient in managing their care? What resources will they need? How will scheduling change? Tracking time? Overtime? How will patient information be accessed and shared? In designing solutions for the future, looking at the structures, systems, and experiences already functioning in public health and home care arenas may propel these efforts forward.

For those who have been working in public health nursing, the looming changes in the health care system may not seem so different from what they are used to. By the nature of their work they already blend many roles as nurse, social worker, case manager, emergency responder, friendly listener, and educator in managing the needs of their patients and the communities they serve. Their experience, knowledge, and wisdom may be an excellent resource to help inform leaders who are plotting a course for the future of health care delivery. One thing is certain, there is much to learn as care delivery moves into our communities. $