



## Reflection

# Walk Quickly, Touch Gently

JANENE PAPENDICK, RN, MA

*“The Lord is my Shepherd; I shall not want. He makes me to lie down in green pastures; He leads me beside the still waters. He restores my soul... my cup overflows.” (Psalm 23:1-3,5)*

**W**hen I applied to the St. John School of Nursing in Huron, South Dakota, in 1973, the school’s president, Sr. Mary Aloysilla, asked me why I wanted to be a nurse. I did not have a well-thought answer as my response was, “I like to walk fast.” She looked at me over the top of her glasses and simply said, “You’re in.”

Little did I know my answer was appropriate. As a nurse, I have walked my whole career. Fast and slow. Up and down hallways, from room to room, building to building, up and down steps. Thousands of times. Coming. Going. Hurrying from one place to another, from one thing to another, one patient to another.

Numerous polls consistently rank nursing as one of the most trusted professions. I thrive in that world and am happy to say that am a nurse.

We are a diverse group. We come from different places, backgrounds, beliefs systems, values, paradigms, passions and priorities.

We are wise to become team members by uniting with peers in our departments or units. We are wise to align ourselves with the mission and vision of our organizations.

We are wise to know our own personal and professional mission. We are wise if we practice what we preach — if we listen to and implement the advice that we give to others and each apply it to our own life.

The thing that most nurses likely would say about ourselves is that we care about our patients. Our patients may be individuals, families or entire communities. From deep inside, we want good outcomes. We want independence for our patients. We want healing even if a cure is not possible. In the end, we want ease and comfort for our patients.

The most common thing that flows among nurses and the thing that we all share is touch. We touch people.

I had to learn how to touch people in the beginning. My hand on a patient’s arm when I started an IV, my hand on a shoulder when listening to breath sounds, my hand adjusting a patient or lifting their legs to help someone into a better position.

A nurse’s touch is more than physical. We touch people with our gaze. We touch people with our presence. We touch people with our reactions and with our words. We touch with our hearts. Touching others is very natural for some nurses.





For others, it is a learned art. It is something that we keep practicing every day.

Today, we touch people with gloved hands. We speak to them through masks and face shields. Despite these barriers, we continue to touch our patients with the calmness of our voices and the reassurance of our eyes. We tap in to their energy with our energy through a balanced combination of skill and efficiency, knowledge and attitude.

As a young nurse, one of my supervisors empowered me with this advice: “When a door opens up, you just have to walk through it.” She was speaking about her own choice, a change from being our night-time supervisor to her new daytime position. It was a hard decision because of the camaraderie and confidence we had in each other during the night shift.

To the best of my ability, I have walked through the doors that opened. In spite of hesitation, insecurities or fear, there were times that I was the expert in the room. I needed to take responsibility. I needed to project calmness in a room full of nervousness. I needed to be the leader.

For 13 years of my career, I worked as the director of nursing in long-term care. During some of the first days of my new job, I was green and unsteady. The environment was much different than what I had imagined.

Early on, I met one of the residents who was dying. This resident often was not kind to those around her, especially her caretakers. When her death was near, I called all the staff who had been working on the wing to her room. It was right that they be present. They came. They laid a hand on her. They said the Lord’s prayer for her.

I was moved tremendously by their loyalty. I was amazed at their love for this resident — someone who did not show appreciation for all they did to keep her comfortable. Somehow, they had mastered the art of accepting her, not judging her. They responded to her unkindness with kindness.

In that moment I knew that these people, this staff — my colleagues — were special. I knew we were standing on sacred ground.

I have always been part of a team. Part of the team that delivered a baby when the doctor did not make it in time for the birth. Part of a team that

organized an emergency C-section when a mom and baby were too fragile for a 28-mile ambulance ride. Through phone calls, contacts and rapid collaboration, we found a doctor that would come to us. A healthy baby boy was born.

I was part of a team that kept a woman from crashing until her temporary pacemaker could be inserted. Part of a team that welcomed families and patients like old friends to our clinic. Part of a team that could converse about a patient’s health concerns like they were our very own. Part of a team that has kept working at quality improvement and streamlining how we plan care and record our own actions. I am grateful that I have been part of so many diverse, knowledgeable, wise and faithful teams.

Nurses are accustomed to change. This time of COVID-19 has brought deep change — change so great that it feels it can move the earth and the gravitational pull under our feet. However, the values, ideas and the basic actions to which nurses cling have not changed.

Florence Nightingale revolutionized the profession of nursing by teaching us to open the windows to let in the air and sunlight. She taught us about feeding our body with nutritious food. She said to clean up and sanitize our environment and to be orderly. She put people at ease, and she held the hands of those who were dying.

When we consistently do these things that have not changed — and will not change, we create trust. We evoke confidence.

I keep walking. Fast — but slower when it is required. I avert my eyes to look down at my feet especially when this path is uneven or slippery. When I am confident in the steps, I can raise my head again and look toward the horizon — the future.

Nurses will keep putting down one foot in front of the next. We move forward. We trust we are on the right path.

**JANENE PAPENDICK** of Aberdeen, South Dakota, recently retired as a full-time nurse. Proud of her profession, she remains on call on paper and emotionally in her heart.

JOURNAL OF THE CATHOLIC HEALTH ASSOCIATION OF THE UNITED STATES

[www.chausa.org](http://www.chausa.org)

# HEALTH PROGRESS®

---

Reprinted from *Health Progress*, Fall 2020

Copyright © 2020 by The Catholic Health Association of the United States

---