

## Nurse is Making a Difference, Inside



Cindy Newkirk describes her patients as “very needy.” On any given day, the nurse might see a 14 year old with post traumatic stress disorder, an elderly cancer patient and a pregnant woman. As she talks about the many problems they face and her hopes of improving their care, it is easy to forget that her patients are all prisoners. Newkirk is a nurse at York Correctional Institution in Niantic, Connecticut’s only jail and prison for females.

She chooses to work in the unconventional setting because “you can make a difference,” she says.

Newkirk’s supervisors nominated her for a Nightingale Award for Excellence in nursing last year, which she won in recognition of the high level of care she provides behind York’s locked gates. The awards are given annually at four locations around the state where visiting nurse associations, hospitals and other health care employers join to celebrate outstanding nurses. This year’s festivities are scheduled for May 3 with concurrent banquets in Groton, Hartford, Stamford and Wallingford.

“Cindy understands she is here for their health and well being regardless of what they’ve done,” said Susan LaPalme, a nursing supervisor at York. “She is a real patient advocate.”

Newkirk had worked for years in home care, the least institutional setting imaginable, before joining the staff at York at the urging of a friend already practicing at the prison. The change was dramatic. Hearing the prison doors lock behind her and knowing that she could not unlock them herself was a strange feeling at first, Newkirk recalls. The inmates’ stories shocked her. She met a number of women who’d been given heroin and prostituted by their families as children.

“You hear things that you’d read in a novel, things you would never think could really happen,” she says.

As a mental health nurse working the overnight shift, Newkirk frequently finds herself evaluating prisoners who could be suicidal or experiencing some other mental health crisis. She offers supportive counseling and sometimes admission to an in-patient unit. She also acts as a triage nurse to decide who needs to access the facility’s various other health services, such as an ob-gyn exam, a visit with the dentist or a follow up with a nurse or doctor.

She has earned the trust of long-time and repeat prisoners, but the trust can never go two ways, she says. “I’m a touchy-feely person,” says Newkirk. “I love hugs. But that’s not allowed here.”

Instead, she can show caring by spending extra time counseling a prisoner. She is also a strong proponent of better mental health care in the system. For example, she is pleased to see more social workers hired by the Department of Corrections to offer therapy, where psychiatric disorders traditionally were managed with only medication.

LaPalme, like Newkirk, came to York only after years of urging from a friend already working at the prison. Now she is visibly proud of her work and is quick to point out that York's health facilities met the rigorous standards to win accreditation by the National Commission on Correctional Health Care. She calls prison nursing "a hard sell," but says that nurses who try it find much to recommend the choice. "This is a safe environment," she insists, and one that offers nurses variety, intellectual challenge and access to state-of-the-art facilities.

The more than 1400 inmates range from their early teens to late eighties and have "myriad" health needs, LaPalme says. Many inmates may not have received good health care on the outside, and so come with chronic diseases that have spiraled out of control or pregnancies for which they've gotten no prenatal care. Nurses have access to so many resources: in- and out-patient units for general problems and mental health, a methadone detox program and access to specialists. Nurses working in prisons have more autonomy than most. For example, prison nurses can dispense non-prescription medications without a doctor's order.

"To be a corrections nurse, it's a cross between school nursing, out-patient care and working in the emergency room," LaPalme says.

"It's never boring," says Newkirk.

Newkirk is under no illusion that she can single handedly reverse the effects of the lifetimes of abuse that many patients bring into the examining room. But she takes great solace in small victories that she terms "little gifts."

"I see people in crisis," she says. "If they can leave feeling better than when they started, I feel satisfaction."