

SALUTE TO  
NURSES



# Virtual Nursing: A Brave New World

Much like the telehealth visits during the COVID-19 pandemic, virtual nurses interact with patients via a screen.

HCA Healthcare says virtual nurses can complete admission health and medication history, perform discharge education and do other administrative work to allow bedside staff more hands-on time with patients.

“In several pilot programs within our organization, remotely located virtual nurses are proving to be extremely valuable in the areas of admissions, medication history, discharge teaching and rounding,” says Sherri Hayes, vice president and chief nursing informatics officer at HCA Healthcare. “Virtual care can attract a variety of nurses, including nurses considering retirement, who are committed to our goals of improving bedside nurse satisfaction and the patient experience.”

Jennifer Ball, RN, BSN, MBA is a director of virtual care at Saint Luke’s Health System of Kansas City. She helped open a new 33-bed nursing unit that uses virtual nurses. She says it’s true, virtual nurses free up bedside nurses to manage the patient’s physical needs and answer call lights sooner. The unit has a special call light for the virtual nurse where the patient gets assistance from a



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medical professional that’s familiar with their condition and can meet their needs, all without being in the room with them.

Ball says communication and team building are critically important to virtual nursing.

“We are all one big staff and have joint staff meetings and education,” she says, adding Saint Luke’s is expanding the

virtual nursing model to other units. Ball says that for virtual nursing to be successful, staff have to be flexible and willing to try new things. They need to buy in from the beginning.

“This is an adventure, and you will be paving the way for not only nursing, but other disciplines that will want to use this model of care,” Ball says.

Virtual nursing is a way for

experienced nurses to stay in the field without staying on their feet. At HCA, many of their virtual nurses have years of experience and are trained in their respective hospital’s electronic health record system, routing and queuing processes and communication tools. Furthermore, bedside nurses check in with patients to make sure they’re comfortable with a virtual nurse.

“We have the opportunity to innovate patient care by being a ‘helping hand’ at the bedside, from a virtual perspective,” says Tabitha Anglea, assistant vice president of CRM clinical operations at HCA Healthcare. “Not only are we supporting the patient, but we are creating a modern nursing model by building a collaborative partnership between the bedside and virtual nurse.”

# Emergency Nurses with Wings

There's a special type of emergency care nurse that deals with life-threatening situations from 5,000 feet or more. Literally.

These nurses work during medical transport flights to support patients on their way to receive trauma care, intensive care or other necessary procedures.

## WHAT DO FLIGHT NURSES DO?

The American College of Education says flight nurses are responsible for ensuring the medical aircraft are sufficiently stocked with equipment and supplies before deployment. They also work with care teams including pilots, paramedics, physicians and other health care professionals. During flights, they monitor ill or injured patients, providing care and advanced life support, if needed, and documenting accurate patient records.

During flight, these nurses make fast decisions in high-stress situations in small places. They typically work in helicopters and airplanes used for critical care transport. They work for air ambulance services, military medical evacuation teams, EMS services, private companies and trauma centers. They may work as paramedic nurses with training as both a nurse



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and a paramedic.

## QUALITIES OF A SUCCESSFUL FLIGHT NURSE

Flight nurses must address life-threatening matters with cool clinical competence and razor-sharp critical thinking skills. They must be adaptable and an agile problem solver that demonstrates composure under pressure. Flight nurses

must have solid communication skills, including with physicians, patients and family members, and be able to work as part of a team. They must demonstrate physical and mental stamina to withstand the tough conditions of medical care flights.

## HOW TO BECOME A FLIGHT NURSE

Start by earning a nursing

degree. The American College of Education says many employers prefer the bachelor's degree in nursing. You must also pass the National Council Licensure Examination to become a registered nurse (RN). Employers may require three or more years of experience in an emergency department, on a critical care unit or in the ICU.

Finally, become a certified

flight registered nurse (CFRN). Other certifications you may have to get are the critical care registered nurse (CCRN) and certified emergency nurse (CEN), basic life support (BLS) certification, advanced cardiac life support (ACLS) certification, as well as certification in pediatric advanced life support (PALS), the transport professional advanced trauma course (TPATC).

# The Modern School Nurse

School nurses are way more than just a weigh station for sick children.

They're specialized registered nurses (RNs) who have experience and education in providing health care to American students with considerations for not only their general health and safety, but also their academic success.

More than 25% of students manage chronic conditions such as asthma, diabetes and epilepsy, while other students are managing conditions including mental health issues, food insecurity, pregnancy and substance abuse. That means the modern school nurse is more than a caregiver. They're also an advocate, educator and problem-solver.

## SCHOOL NURSE RESPONSIBILITIES

School nurses do more than just hand out ice packs and bandages. They also:

- Assess the severity of illness or injury in students.
- Distribute medications provided by students' parents and other health care professionals.
- Care for students with chronic conditions.
- Ensure students are up to date on vaccinations.
- Direct the provision of health services in the school.
- Screen students for vision, hearing and other issues.

- Prevent and control the spread of communicable diseases.
- Connect students and families to relevant health and community resources.
- Provide mental health support to students.
- Collect health data for local, state and national officials.
- Promote overall community health through health and wellness initiatives.

The National Association of School Nurses says schools with full-time nurses see lower absentee rates, higher graduation rates and fewer illness-related early dismissals. The organization argues every dollar spent on school nurses saves \$2.20 in medical costs and lost productivity for students' families and teachers. They allow teachers and administrators to focus solely on education, and 79% of

parents say the presence of a school nurse would influence their decision when choosing a school for their child.

## HOW TO BECOME A SCHOOL NURSE

Start by earning a bachelor's degree in nursing (BSN) and become an RN, completing all state requirements for licensure. Many schools prefer nurses with at least two years of clinical experience. Once you

gain those, look into your state's requirements. You may have to earn a school nurse certificate, a credential program or graduate education. The National Board of Certification for School Nurses offers one certification based on clinical practice hours. Nurses must maintain a current RN and at least 2,000 hours of clinical practice in school nursing in the past five years, of which 750 must be in the past three years.



# The Role of Correctional Nurses

Inmates serving time are in need of appropriate medical care for wellness as well as any emergent or chronic conditions. Correctional nurses are an important part of this care team.

## QUALITIES OF A CORRECTIONAL NURSE

The American Nursing Association (ANA) says correctional nurses must possess astute clinical judgment to address a variety of medical needs in a rigorous safety environment while navigating complex dynamics. Confidence and assertiveness are paramount, the ANA says, with self-assurance being a critical skill to managing the challenges in a correctional environment. The International Association of Forensic Nurses also points out that, in correctional settings, resources are limited, so nurses will need to be creative in their patient care.

Correctional nurses must strike a balance between a caring attitude and maintaining safe boundaries, the National Commission on Correctional Health Care says. These nurses cannot usually touch their patients, so words and actions must establish the caring relationship, not hand-holding or a shoulder squeeze.



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## HOW TO BECOME A CORRECTIONAL NURSE

Correctional nurses often hold an associate's or bachelor's degree as well as a certified corrections nurse (CCN) designation. They must pass the exam to become a licensed practical nurse (LPN) or registered nurse (RN) and fulfill any other requirements to practice in their state.

Employers often ask for clinical experience before entering the correctional setting and nurses looking to add experience can turn to hospitals, critical care units, emergency departments and medical surgical settings.

## WHERE THEY WORK

These specialized nurses are in jails and prisons, of

course, but also can find work in juvenile detention homes, halfway houses and work release settings. They treat medical conditions, both urgent and chronic, and may provide health care education to patients. They administer medications and work with correctional administration to develop health and safety protocols.

The ANA says that contrary to common perceptions, correctional facilities are some of the safest places to work. These facilities have some of the most stringent security protocols and inmates generally see nurses as allies in their health care journey, minimizing the likelihood of violence directed towards medical staff.

# Somatic Healing for Nurses

Somatic healing involves using body-centered techniques to release accumulated stress, anxiety and trauma from the nervous system.

That includes deep breathing, grounding, shaking and gentle movement. Somatic healing can help anyone, but particularly nurses, help shift out of fight-or-flight mode, reduce burnout and fight compassion fatigue.

## SOMATIC HEALING TECHNIQUES

Some somatic healing techniques from Johns Hopkins Medicine include:

- A body scan to calm and soothe. Find present awareness within the body by attending to physical sensations and needs. Start by laying down or sitting in a comfortable position, close your eyes or lower your gaze. Take a few deep, slow breaths. Settle into your body, letting your stomach expand on the inhale and relax on the exhale. Bring your attention into your toes. Notice if they are warm, cold, tingling or tense. You don't need to change them; just be aware. Move upward, without judgment, and gently bring a wandering mind back to the activity. If you find tension, breathe into it and release it on the exhale.

- Practice conscious



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breathing by reconnecting to the baseline experience of inhale and exhale and how it serves us. Some conscious breathing techniques include box breathing, where you inhale for four counts, hold for four counts, exhale for four counts and pause for four counts.

- Use tactile activation to

reinvigorate and ground the body through physical contact. Using a cupped hand or your fingertips, firmly and quickly pat all reachable areas of the body, including your arms, legs, torso and head, like you're waking yourself up. Using light, sweeping motions, brush the body from head to toe, releasing residual energy.

## WHAT DOES THIS DO?

Somatic exercises retrain muscles and release habitual tension, which can relieve the root cause of chronic pain and help regulate our nervous system. Stressful clinical situations can often trigger the body's fight-or-flight response, and these exercises can bring the body back to a

parasympathetic state, reducing anxiety and burnout. Over time, these exercises can help release stored emotional tension and increase emotional awareness, improving mental resilience and developing a stronger, more regulated connection with the body that, in turn, creates a safer, more empathetic space for patients.

# Nurses on the Battlefield

Caregiving on battlefields long predates the United States, with both men and women tending the wounded.

During the Revolutionary War, women became increasingly visible in these roles

## A HISTORY OF NURSING IN WAR

Nurses as caregivers on battlefields long predates the United States, with both men and women tending the wounded. During the Revolutionary War, women became increasingly visible in these roles that had previously been dominated by men, a practice that continued during the War of 1812 and later conflicts.

During the Civil War, nursing became an organized part of the military as the U.S. government officially recruited women to serve alongside thousands of men as nurses, including Red Cross founder Clara Barton.

## THE SPANISH-AMERICAN WAR

The U.S. Army first created a formal nursing corps during the Spanish-American War in 1898. While more than 250,000 American troops fought in the war, as many as 1,700 women volunteered to aid the sick and wounded, including Black nurses, Native American nurses and more. Twenty-one



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female Army nurses died in the line of duty, mostly from exposure to typhoid. The experiences of these nurses and the troops they cared for lead to the Army Nurse Corps in 1901.

## WORLD WAR I

Both the U.S. Army Nurse Corps and the new Navy Nurse Corps treated American military members during World War I. More than 20,000 women served in military hospitals in the U.S. and overseas. Vashti Bartlett served in France.

“If they are not so badly wounded we bring them back and heal them and send them forward again to the firing line that they may go through this

agony once more — but such is the bravery of these ordinary French men,” she wrote, serving a Pau in 1915.

Nurses worked near the battlefields on surgical and gas treatment teams, on hospital trains, on hospital ships, and in all manner of care settings. More than 200 nurses died of disease and three were wounded by shells. Julia Stimson became the first woman to achieve the rank of major, and other nurses were among the first women to receive military medals.

## WORLD WAR II

Nearly 60,000 nurses served in World War II, which also served to revolutionize

medical services with a better understanding of shock, blood replacement and resuscitation. The first Army flight nurses took to the air, racking up an incredible record of just five deaths per 100,000 patients flown. They were also captured, serving time in Japanese prison camps. Some landed on the beaches of Normandy. After the war’s end, they continued to serve, caring for victims of the atomic bombs in Japan and in displaced persons camps in Germany.

## COLD WAR ERA

Nurses served in the Korean War and in Vietnam, overseeing the introduction of more advanced medical

technologies, including in mobile army surgical hospital (MASH) units. U.S. Navy nurse Bernadette McKay served at a hospital in Rach Gia, Vietnam, helping to support South Vietnamese medical personnel.

“Our mission was gigantic — to teach ourselves out of a job. We had to learn basic language and adapt to local customs,” she says. “Progress was slow but steady and when we were relieved after one year, we proudly left four functioning OR technicians, two emergency room workers, a functioning X-ray department, a blood bank program, a competent lab technician, and more importantly — a very capable surgeon.”



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# The Nursing Faculty Crisis

It was projected that the U.S. would be short more than 250,000 nurses in 2026.

This can cause massive burnout and attrition.

What is less well known is that nursing schools have to turn away tens of thousands of applicants due to another shortage — a faculty shortage. The American Association of Colleges of Nursing (AACN) says budget constraints, an aging faculty and increasing job competition from clinical sites are all contributing factors.

## SCOPE OF THE SHORTAGE

The AACN says U.S. nursing schools turned away more than 80,000 qualified applications from baccalaureate

and graduate nursing programs in 2024 because of insufficient faculty, clinical sites, classroom space, clinical preceptors and budget constraints. In October 2025, AAC released another survey in which schools said they needed to create an additional 150 faculty positions to accommodate student demand and showed a national nurse faculty vacancy rate of 7.2%. Most of those vacancies were faculty positions requiring or preferring a doctoral degree.

## FIGHTING THE SHORTAGE

Groups are working to relieve the

shortage in several ways.

- The AACN is working with organizations to support doctoral nursing students, advocating for new federal legislation and increased funding for graduate education. It is hosting an annual faculty development conference, and promoting faculty careers through the Graduate Nursing Student Academy.

- Several states, including Colorado, Georgia, Hawaii, Maryland, South Carolina and Virginia, are working to increase the number of clinical nurse educators, or preceptors, by offering tax incentives for nurses serving in these roles.

- The Jonas Philanthropies, through the Jonas Nurse Leaders Scholar Program, is providing financial support

and leadership development to more than 1,400 scholars in all 50 states. The aim is to increase doctoral-prepared nurses to serve as faculty, scientists and clinicians.

- Schools of nursing are forming academic-practice partnerships and working collaboratively with stakeholders to bridge the faculty gap. In 2022, HCA Healthcare announced just such an effort with Florida International University.

- The Health Resources and Services Administration (HRSA) runs the Nurse Faculty Loan Program to assist graduate students in pursuing faculty careers. Up to 85% of students' education loans, plus interest, will be canceled if students agree to teach at a school of nursing.