

# Joel Mueller



## **Why did you choose older adult services as a career?**

I chose to work in gerontological nursing about 5 years ago. At the time I was working in the food industry. I loved taking care of people and meeting their needs, but loathed providing services that I felt were bad for people. So I looked to nursing. I fell in love with the impact I can make on our residents lives, and found myself caring for the residents as much as they care for me. I believe that older adults are an underserved, growing population that deserves the focus of caring, resourceful, educated individuals.

## **What do you want to do with your life within the older adult services profession?**

As a certified wound, ostomy, continence nurse, I can better serve the older adult population who is most likely to be dealing with these issues. Certification in wounds, ostomies, and continence will allow me to educate others at our facility, better collaborate with our consulting medical providers, and assure that our residents are living up to the best of their ability.

## **How do you hope to impact the profession?**

I intend to use my certification to educate colleagues in and consultants to our facility as to best practice standards. I also intend to use the education to develop a procedure and manage the issues of wounds, ostomies, and continence. The education I receive will be invaluable no matter where I serve the older adult population.

## **Provide a specific example of when you positively impacted someone through the care or services you provided.**

As an evening shift RN on our transitional care unit, I helped multiple patients and their families through the rehabilitation process. One patient I cared for, EF, was rehabilitating from weakness and debility related to a gastrointestinal virus and chemotherapy. The patient often did not feel like getting out of bed. The patient's goal was to return home with as few services as possible. As the patient's gastrointestinal virus was clearing and the patient was feeling stronger, physical therapy was considering discontinuing services and recommending assisted living. Upon speaking with EF and her spouse, EF explained that she really wanted to return home, and thought she should be able to continue. I discussed the change in status with the interdisciplinary team and the providing nurse practitioner, and we agreed to extend her therapy for another few weeks. EF later discharged home with limited services. She thanked me, and I was overjoyed to have helped her return to her home.