Sharon Berthrong has an undergraduate degree in organizational communications and a master’s in public administration. She worked for years as a consultant to medical practices in the Colorado Springs area before moving to Denver and joining University of Colorado Hospital.

“How much does Berthrong draw for her services at UCH? Not a cent. She’s one of the hospital’s 500 or so volunteers, but one in the thick of clinical care during her two half-days a week at UCH. Berthrong serves as a navigator for heart failure patients, helping them manage their disease and lending a sympathetic ear during difficult times.

“Patients will say to me, ‘Since you don’t have a uniform on, I’ll tell you this.’” Berthrong said. “They tell me how they live their lives.”

Details about patients’ diet, exercise, and medication compliance are gold to Amanda Nenaber, RN, CCNS, a clinical nurse specialist with the hospital’s Heart Failure Program who works closely with Berthrong.

“Sharon builds rapport with patients,” she said. “She helps to identify issues patients have with self-management of their condition. With that I can involve case managers, social workers, and other multidisciplinary teams to get additional resources patients might need.”

Regular check-in. At the start of her shift, Berthrong gets a list of patients from Nenaber and heads off on her rounds. She gives each patient the hospital’s 100-plus-page “Red Book,” a comprehensive guide to managing heart failure, and recruits patients for “Heart Failure University,” a series of classes that provides a wide range of information patients will need after they leave the hospital. She brings scales and blood pressure cuffs to patients to take home – seemingly small but time-consuming tasks that free up Nenaber to provide additional clinical care.

Berthrong also touts “My Health Connection,” (MHC), the Epic online portal that allows patients to check test results, review medication lists, refill prescriptions, make appointments, ask questions and generally stay more involved with their own care. She offers to sign patients up on the spot using the computer on wheels in each patient room.

“I sign up whoever will give me their email address,” Berthrong said. “People who sign up love it.”

Listen and learn. The work comes naturally to Berthrong, who said she’s volunteered all her life, though this is the first time she’s worked with patients.

“There is a reward in helping people,” she said, “and in knowing I can do something to make people’s lives easier. It’s totally about improving the here and now.”
She’s learned just how valuable simple human contact can be to patients suffering from a debilitating and isolating disease.

“Some people just need to chat,” Berthrong said. When she encounters a “garrulous” one, she’ll make a point of “popping in” to listen and swap a few friendly words.

In one case, a connection she formed in the hospital continued after the patient was discharged to a skilled nursing facility. The patient made sure Berthrong’s offer to visit post-discharge wasn’t an idle promise. “She said, ‘Don’t tell me you’re coming if you aren’t,’” said Berthrong, who kept her commitment.

Boom town. The patient navigator position grew from a series of unplanned connections Berthrong made after she moved to Denver from Colorado Springs two years ago to be near her grandson. Retired, but not the retiring type, she was looking for ways to stay active and involved in life when she ran across a notice in the Denver Post for a federal project called Boomers Leading Change in Health.

Denver is one of nine communities chosen for the initiative, which targets adults 50 years and older who are interested in volunteer opportunities aimed at effecting positive social change. The focus in Denver is on health care.

That was a perfect fit for the politically active Berthrong, whose daughter is a cardiologist at Case Western Reserve in Cleveland. The “Boomer” coursework required that Berthrong attend four-hour classes led by PhD instructors two nights a week for a month. After finishing the coursework, she began looking for places to offer her services. Armed with her course material and notes, she walked into the Volunteer Services office at UCH and asked manager Rita Alexander what she could do at the hospital.

Welcome challenge. Berthrong let Alexander know she wanted something more substantive than greeting visitors to the hospital. Alexander sent an email describing Berthrong’s background and coursework to Nenaber, who was at first skeptical.

“I thought, ‘What am I going to do with a volunteer?’” Nenaber said. But then she began thinking about how an extra pair of hands could assist with patient care and worked with Alexander and Volunteer Services Coordinator Deborah Peek to hammer out a job description for the volunteer position.

Nenaber began by having Berthrong shadow her as she made her patient rounds, then gave her a list of patients to visit and turned her loose.

If there were any generation gaps between Berthrong – who politely but firmly declines to reveal her age – and Nenaber, 30, they quickly bridged them.

“I clicked with Amanda,” Berthrong said. “We sort of made the job up as we went along.” And it didn’t take long for the volunteer to develop a powerful respect for the work Nenaber and her colleagues do on behalf of their patients.

What generation gap? Berthrong and Amanda Nenaber (left), clinical nurse specialist with the Heart Failure Program, quickly formed a close working relationship.

Berthrong says she values the opportunity to help heart failure patients manage their disease.
Nenaber said she in turn quickly discovered Berthrong’s strengths.

“The most impressive thing is that she is not afraid to ask questions,” Nenaber said. “She’s gotten to know the nurses and navigates her way around the hospital.”

Berthrong has also joined the Hospital to Home (H2H) Heart Failure Taskforce, a team of clinicians responsible for ensuring heart failure patients receive the care and resources they need to avoid readmissions.

“She’s a real member of the team,” Nenaber said. “She’s another familiar face that patients know and remember.”