

# NUR 290 Public Health Nursing Spring 2023

# **NUR 290 Public Health Nursing**

5 units (Theory=3units, Clinical=2units)
Pre-requisites: Acceptance into A-BSN program
Placement in curriculum: Prelicensure requirement

Time: TBD Room: TBD

Course Faculty: TBD Faculty office: TBD Faculty email: TBD Faculty phone: TBD Faculty office hours: TBD

#### I. Important Information

This is a course in a series of prelicensure nursing courses to prepare the nursing student for the safe, patient-centered and family-supported, compassionate care in a variety of healthcare settings. The best way to be prepared for your lecture and clinical experience is to maintain a healthy mental, physical, and spiritual life. Come to class after a good night's sleep, eat nutritious food, and stay current with reading assignments. For your clinical experience, come with excitement and understand you will continue to learn in the clinical setting and apply the concepts and skills you are learning in class. To help with your success in this course and program, it is not suggested you work more than 20 hours per week if you have to work.

#### Westmont catalogue course description

This course provides concepts and topic on the care of an individual, group, community, and population locally, regionally, nationally, and globally. The public health framework is described including care at the primary, secondary, and tertiary levels. Students will develop and refine critical thinking skills on a broader level with systems thinking. This course complies with CCR1491 of the CA Board of Registered Nursing Public Health Certificate and includes 90 hours of patient, family, community and population care in a variety of settings.

# Instructor's further description

There is nothing more powerful than making an impact in your own community or the communities around you. Come to class excited to see how you can impact healthcare disparities to vulnerable populations.

### Serving Society; Enacting Justice

This course fulfills Westmont's General Education requirement for Serving Society; Enacting Justice within the Major. Students will perform a community needs assessment in different areas of Santa Barbara and Ventura Counties. Students will review area demographics, social determinants of health, environmental influences and community resources. Students will identify vulnerable populations, healthcare disparities and ethical considerations.

Commented [MOU1]: Beginning of GE information

#### Student Learning Outcomes for Serving Society; Enacting Justice

- 1. Exhibit compassionate care to vulnerable populations in the local, regional, national, and global arenas.
- 2. Develop critical thinking and clinical judgement at the systems level to impact local change in identified areas of healthcare disparities.
- 3. Examine the environmental impact that can influence a community's health and develop a plan to help change it.

#### **Instructional Activities**

- Lecture and class discussion regarding the importance of community needs assessments, inequity in vulnerable populations, healthcare disparities, social injustices including lack of access to care, lack of insurance, and lack of knowledge.
- 12 hours of assessment in a community or part of a community in Santa Barbara and
  Ventura Counties. Assessment includes demographic assessment (race, ethnicity, age,
  income, workforce, education), physical assessment of area (housing, food sources,
  neighborhoods, schools, community resources), environmental factors that may influence
  the assessment (air, water, noise, crime), social or political disenfranchisement, and any
  other visible factor that could influence the vulnerability of the population studied.
  Engagement with clinical instructor for questions and guidance.
- Research the county demographics and community resources.
- Identify main community need
- Development of a community nursing care plan
- Write a community needs assessment with plan of care for the community and population you have identified.
- Present to class during the last two weeks of the course. Presentation can be in the form
  of an oral report using 10 slide deck PowerPoint. Include pictures of the neighborhood.

#### **Grading Criteria**

- Ability to construct a clear central picture of the community and population assessed.
- Organization of the data collected to inform the reader of the needs of the vulnerable population.
- Comparison of identified need to the most current Public Health Community Needs Assessment.
- Written community nursing plan of care for the population and the identified need of this
  population.

#### **ABSN Program Mission**

Prepares faithful servant leaders to provide patient-centered and family supported safe, compassionate care for diverse populations and communities across the lifespan and in all health care settings.

### **AACN Baccalaureate Essentials (2008)**

The Commission on Collegiate Nursing Education (CCNE) is an autonomous accrediting agency, contributing to the improvement of the public's health. A specialized/professional accrediting agency, CCNE strives to promote the quality and integrity of baccalaureate and graduate nursing programs. Following are the nine baccalaureate essentials used as the framework for the current curriculum. In 2021 the Essentials were revised and will be integrated into the curriculum over the next three years.

- I Liberal Education for Baccalaureate Generalist Nursing Practice
- II Basic Organizational and Systems Leadership for Quality Care and Patient Safety
- III Scholarship for Evidence-Based Practice
- IV Information Management and Application of Patient Care Technology
- V Healthcare Policy, Finance, and Regulatory Environments
- VI Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
- VII Clinical Prevention and Population Health
- VIII Professionalism and Professional Values
- IX Baccalaureate Generalist Nursing Practice

#### **AACN Essentials (revised 2021)**

The Essentials: Core Competencies for Professional Nursing Education provides a framework for preparing individuals as members of the discipline of nursing, reflecting expectations across the trajectory of nursing education and applied experience. The *Essentials* introduce 10 domains that represent the essence of professional nursing practice and the expected competencies for each domain. The competencies accompanying each domain are designed to be applicable across four spheres of care (disease prevention/promotion of health and wellbeing, chronic disease care, regenerative or restorative care, and hospice/palliative/supportive care), across the lifespan, and with diverse patient populations.

#### **Domains for Nursing**

Domains are broad distinguishable areas of competence that, when considered in the aggregate, constitute a descriptive framework for the practice of nursing.

#### The Ten Domains:

Domain 1-Knowledge for Nursing Practice

Domain 2-Person-centered Care

Domain 3-Population Health

Domain 4-Scholarship for Nursing Practice

Domain 5-Quality and Safety

Domain 6-Interprofessional Partnerships

Domain 7-Systems-based Practice

Domain 8-Information and Healthcare Technology

Domain 9-Professionalism

Domain 10-Personal, Professionals, Leadership Development

(The Essentials: Core Competencies for Professional Nursing Education, 2021)

5

#### Quality and Safety in Nursing Education 2007 (QSEN) Competencies

#### 1. Patient-centered Care

Recognizing the patient or designee(s) as the source of control and full partner in providing caring and coordinated care based on respect and diversity.

#### Safety

Minimizing risks of harm for patients and providers by evaluating systems and individual performances.

#### 3. Informatics

Using information and technology in communicating, managing knowledge, mitigating errors, and supporting all types of decision-making.

#### 4. Teamwork and Collaboration

Functioning effectively at all levels of nursing and fostering open communication amongst interprofessional team members while encouraging mutual respect and a shared achievement of safe quality care.

#### 5. Quality Improvement

Continuously monitoring the healthcare system for outcomes impacting safe quality care and methods to improve design care for optimal results.

#### 6. Evidence-based Practice

Integrating best current evidence with clinical experts and patient/family/groups that value the delivery of optimal healthcare.

#### Core Competencies for Interprofessional Collaborative Practice (2016 update):

Competency 1: Values/Ethics for Interprofessional Practice

Work with individuals of other professionals to maintain a climate of mutual respect Competency 2: Roles/Responsibilities

Use the knowledge of one's own role and those of other professionals to appropriately assess and address the health care needs of patients and to promote and advance the health of populations. *Competency 3: Interprofessional Communication* 

Communicate with patients, families, communities, and professionals in health and other fields in a responsive and responsible manner that supports a team approach to the promotion and maintenance of health and the prevention and treatment of disease.

#### Competency 4: Teams and Teamwork

Apply relationship-building values and the principles of team dynamics to perform effectively in different tea roles to plan, deliver, and evaluate patient/population-centered care and population health programs and policies that are safe, timely, efficient, effective, and equitable.

#### **Program Learning Outcomes (PLO)**

- 1. Exhibit Christian character and servant leadership while providing compassionate care for a diverse population in communities across state, national, and global settings.
- 2. Evidence-based best practices, critical thinking, and clinical reasoning, inform clinical judgement for the provision of patient-centered, safe, quality care.
- 3. Create patient education plans that are culturally specific to the patient and that incorporate the family support system.
- 4. Communicate effectively with the interprofessional team to ensure a wholistic approach to patient-centered care.
- 5. Continue inquisitive learning by using the Electronic Medical Record and Informatics to meet quality metrics in a variety of healthcare and geographic settings.

6. Advocate for healthcare policies for the underserved, vulnerable populations to ensure equity with access to care for prevention, remedial, supportive, and rehabilitative nursing care regionally, nationally, and globally.

#### **Course Learning Outcomes (CLO)**

- 1. Exhibit compassionate care to vulnerable populations in the local, regional, national, and global arenas.
- 2. Develop critical thinking and clinical judgement at the systems level to impact local change in identified areas of healthcare disparities.
- 3. Examine the environmental impact that can influence a community's health and develop a plan to help change it.
- 4. Evaluate the importance of understanding child abuse and neglect, it's prevention, detection, intervention, and mandatory reporting responsibility of the nurse.
- 5. Appraise the disaster plan for your community, to become prepared to assist in the event of a nature or planned disaster and to educate your community members.
- 6. Discusses the different public healthcare nursing roles (school, religious establishment, public health department, case manager) useful when collaborating with the interprofessional team (psychologist, social workers, healthcare providers) to establish community health initiatives.
- $\overline{7}$ . Use informatics and other technology to understand the healthcare needs of community and populations.

PLO and CLO Alignment Table

PLO and CLO Alignment Table	
Program Learning Outcomes	Course Learning Outcomes
1. Exhibit Christian character and servant	1. Exhibit compassionate care to vulnerable
leadership while providing compassionate	populations in the local, regional, national,
care for a diverse population in communities	and global arenas.
across state, national, and global settings.	
2. Evidence-based best practices, critical	2. Develop critical thinking and clinical
thinking, and clinical reasoning, inform	judgement at the systems level to impact local
clinical judgement for the provision of	change in identified areas of healthcare
patient-centered, safe, quality care.	disparities.
3. Create patient education plans that are	5. Appraise the disaster plan for your
culturally specific to the patient and that	community, to become prepared to assist in
incorporate the family support system.	the event of a nature or planned disaster and
	to educate your community members.
4. Communicate effectively with the	6. Discusses the different public healthcare
interprofessional team to ensure a wholistic	nursing roles (school, religious establishment,
approach to patient-centered care.	public health department, case manager)
	useful when collaborating with the
	interprofessional team (psychologist, social
	workers, healthcare providers) to establish
	community health initiatives.
5. Continue inquisitive learning by using the	7. Use informatics and other technology to
Electronic Medical Record and Informatics to	understand the healthcare needs of
meet quality metrics in a variety of healthcare	community and populations.

and geographic settings.	
6. Advocate for healthcare policies for the	4. Evaluate the importance of understanding
underserved, vulnerable populations to ensure	child abuse and neglect, it's prevention,
equity with access to care for prevention,	detection, intervention, and mandatory
remedial, supportive, and rehabilitative	reporting responsibility of the nurse.
nursing care regionally, nationally, and	
globally.	

#### Required Textbooks

Title	Author	Publisher	ISBN#
Community and	Cherie Rector &	Wolters Kluwer	978-1-975123-04-8
Public Health	Mary Jo Stanley		
Nursing: Promoting			
the Public's Health,			
Tenth Edition			
Nursing Diagnosis tex	tbook of your choice (ca	n be a bundled application	on on smart phone)
Nursing Drug textboo	k of your choice (can be	a bundled application or	n smart phone)
Publication Manual	American Psychological	American Psychological	978-143383216
of the American	Association	Association	
Psychological			
Association (7 <sup>th</sup> ed.)			

#### **Supplemental Instruction**

- ATI Supreme Essentials provides the visual and auditory learners with skill vignettes, review modules, online tutorials, dosage calculation and safe medication practice, computer adaptive NextGen and current NCLEX test item types, civility tutorials, and
- ATI Pulse (analytics engine that predicts students' probability of passing the NCLEX). ATI
  also provides a host of practice and proctored NCLEX style exams as well as a Predictor
  exam to prepare for the NCLEX. ATI tools will be fully integrated into each nursing
  course.
- Lippincott Course point.

# **Suggested Resources**

- 1. Articles
- 2. Position Papers
- 3. Healthcare Policies
- 4. Westmont College Library and online databases (EBSCO, ProQuest, ERIC, CINALH)

### Assessment of CLOs (Assignments, quizzes, exams)

The assessments used in this course to measure your learning and meeting the content objectives and course learning outcomes will include class participation, quizzes, exams using NCLEX style questions, and a signature assessment (comprehensive assessment).

<b>Course Learning Outcomes</b>	Instructional activity	Assessment
1. Exhibit compassionate care to vulnerable populations in the local, regional, national, and global arenas. 2. Develop critical thinking and clinical judgement at the systems level to impact local change in identified areas of healthcare disparities. 4. Evaluate the importance of understanding child abuse and neglect, it's prevention, detection, intervention, and mandatory reporting responsibility of the nurse. 6. Discusses the different public healthcare nursing roles (school, religious establishment, public health department, case manager) useful when collaborating with the interprofessional team (psychologist, social workers, healthcare providers) to establish community health initiatives. 7. Use informatics and other technology to understand the healthcare needs of community and populations.	Lecture, class discussion, shared experiences, scaffolding case studies, simulation	Assignments and individual and group presentations,
3. Examine the environmental impact that can influence a community's health and develop a plan to help change it. 5. Appraise the disaster plan for your community, to become prepared to assist in the event of a nature or planned disaster and to educate your community members.	Clinical experiences	Group presentations

# Assignments:

Name of Assignment	Total Points (Percent)	Due Date
Syllabus QUIZ	5 pts (1%)	Week 1
Student Learner Needs Survey	5 pts (1%)	Week 1
QUIZZES	100 pts (17.8%)	Weeks 3, 6, 11 and 14 in class
Child and Elder Abuse Mandatory Reporting Assignment	100 pts (50 points each) (17.8%)	Week 8 in class
ATI proctored Exam	50 pts (9%)	Week 15
Disaster Assignment (group)	100 pts (17.8%)	Week 5 or 6
Faith-based Nursing Paper (individual)	100 pts (17.8%)	Week 9
Community Needs Assessment Presentation (group)	100 pts (17.8%)	Week 16
Total	560 pts	

<sup>\*</sup>Student must pass theory course with 76% and clinical course with "Pass" to graduate.

# **II. Course Policies**

# Grading

Grade points per unit of credit are assigned on the following scale: A 4 grade points

A- 3.7 grade points

B+ 3.3 grade points

B 3.0 grade points

B- 2.7 grade points

C+ 2.3 grade points

C 2.0 grade points

C- 1.7 grade points

D+ 1.3 grade points

D 1.0 grade points

D- 0.7 grade points

P (At least D-) No grade points assigned. Not computed in the grade point average. F 0 grade points

NC (F) No grade points assigned. Not computed in the grade point average. W No grade points assigned. Not computed in grade point average.

WF No grade points assigned. Not computed in grade point average.

WP No grade points assigned. Not computed in grade point average.

WX No grade points assigned. Not computed in grade point average.

Westmont does not compute the units and grades students earned at other colleges in its grade average. (Exception: Courses and grades taken as part of a Westmont off-campus program are posted on the Westmont transcript and will be calculated in the Westmont GPA.)

Apart from the exceptions identified below, all courses at Westmont are graded using a letter scale (A, B, C, D, F).

Instructor Initiated Exceptions:

- For pedagogical reasons, an instructor may elect to use P/NC grade reporting in any class not approved for GE credit. It is assumed that the same gradereporting
  - system will be applied to the entire class.
- 2. With the approval of the General Education Committee, P/NC grade reporting may be used in appropriate, GE-approved courses.
- 3. When P/NC grade reporting is used, the syllabus must reflect this fact. In addition, departments are encouraged to include a notice in the catalog that the course may use P/NC grading.

#### Office of Disability Services

Students who have been diagnosed with a disability are strongly encouraged to contact the Office of Disability Services as early as possible to discuss appropriate accommodations for this course. Formal accommodations will only be granted for students whose disabilities have been verified by the Office of Disability Services. These accommodations may be necessary to ensure your equal access to this course.

Please contact Sheri Noble, Director of Disability Services. (310A Voskuyl Library, 565-6186, snoble@westmont.edu) or visit the website for more information: http://www.westmont.edu/offices/disability

#### **Dress Code**

Comfortable, non-binding clothing

#### **Academic Integrity**

When students join our college community, they are expected, as apprentice scholars, to search for truth with integrity and accuracy. This guest requires humility about our abilities, respect for the ideas of others, and originality in our thinking. Since Westmont is a Christian community, the integrity of our scholarship is rooted in the integrity of our faith. We seek to be followers of Christ in the classroom, in the library, and at the privacy of our computers. Violations of academic integrity are a serious breach of trust within the Westmont community because they violate the regard for truth essential to genuine learning and Christian consistency. Such deception also hurts those students who do their work with integrity. Violations of Academic Integrity may consist of cheating (the use of unauthorized sources of information on an examination or other assignment), falsification (misrepresentation of facts in any academic project or obligation) or plagiarism (the use of someone else's words or ideas without giving proper credit). Faculty and students should operate in an environment of mutual trust and respect. Faculty will expect students to act in ways consistent with academic integrity. However, for both scholarly and spiritual reasons, cheating, falsification, plagiarism and all other violations of academic integrity will not be tolerated in the Westmont community. Please familiarize yourself with the entire Westmont College Academic Integrity Policy. This document defines different violations of academic integrity and their consequences. It also contains very helpful information on strategies to recognize violations of academic integrity before they occur. Dishonesty in the clinical setting, will not be tolerated and students will be removed followed by program suspension or termination.

#### Technology in the Classroom

Laptops, tablets, and smart phones can be used in the classroom with the permission of the faculty. The use of smart phones in the clinical setting will depend on each clinical setting's rules. Smart phones in the clinical setting can be used for clinical related resources (drug book, Taber's, calculation, etc.). Recording lectures is also at the discretion of the faulty and permission must be granted.

#### **Emergencies**

In the event that an emergency occurs during instruction, it is important to be familiar with the practices in place for the classroom. Please review the document at https://integready.app.box.com/AnticipatingInClass and direct any questions or concerns to the Office of Institutional Resilience.

III. Weekly Course Schedule (\*Subject to change with notification)

# \*Subject to change at any time, you will be notified of any changes

Week	Content Topics and Objectives	Reading Assignment	Activities	Assignments & Outcome Measurement
1 01/10	Introduction to Public and Community Health Nursing  By the end of the class students will be able to:  Explain the concepts of community, population, aggregate and public health  Differentiate the three level of prevention by citing at least three examples of nursing interventions  Describe the public health core functions and related essential public health services basic to community/public health nursing  Describe the characteristics of community/public health nursing  Discuss the roles of the public health nurse within the framework of public health nursing functions  Discuss the community/public health nursing competencies	Rector Ch. 1, 2  Quad council Community/public health nursing competencies appendix p. 869  Quad council Article  QSEN:1, 2, 3, 4, 5, 6  Bacc. Essentials: II, III, V, VI, VII, VIII,  Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10  IPEC: 1, 2, 3, 4	1. Orientation to theory and clinical 2. Review of course assignments (describe community needs assessment and provide resource) 3. Review of clinical experience and settings What is Public health? https://www.apha.org/what-is-public-health	Student engagement and active discussion with questions Syllabus quiz
2 01/17	Community Health Nursing Roles and Theoretical Frameworks Community Needs Assessment	Rector Ch. 15	Guest speakers community needs assessment steps in practice	

Commented [CV2]: Lecture of role of the public health nurse

Ν	J	U	R	1	2	9	С

Community as a client	Ch. 12 modules via course points			
By the end of the class students will be	points			
able to:	Muecke Article ref: Muecke M. A. (1984).			
Describe the characteristics of	Community health diagnosis in			
community/public health nursing	nursing. Public health nursing			
practice when the client is a	(Boston, Mass.), 1(1), 23–35.			
community	https://doi.org/10.1111/j.1525- 1446.1984.tb00427.x			
Discuss the principles of community public health nursing				
public fleatur flursing	Healthy People 2030			
Describe the following conceptual	Treating Feople 2000			
models: Minnesota Wheel: Public				
interventions Model and the Public	CCR1491(4)(H)			
Health Nursing Practice Model.	Population based practice:			
Community Needs Assessment	assessment and development			
Community Needs Assessment  By the end of the class students will be	of community collaboration at			Commented [CV3]: Introduction to community needs assessment, assignment of clinical instruction
able to:	the level of systems, community and			Here it is not only the assessment but the actual method as it
	family/individual			is conducted in this field
Describe methods of community	,			
health assessment/community needs				
assessment				
Describe the methods for collecting community data				
Describe the nursing process applied	CCR1491(4)(H) Assessment			
to the community as a client including	of health needs of individuals			
the Muecke Model community health	and families, to include			
diagnosi <mark>s</mark>	environment, and interventions			Commented [n4]: Carol: Lecture and class discussion on
Planning Implementing and evaluating	across the lifespan			understand selected concepts basic to community-oriented nursing practice; community, community client, community
community public health programs	OSEN:4 2 2 4 5 6			health and partnership for health.
By the end of the class students will be	QSEN:1, 2, 3, 4, 5, 6			Students begin to develop a community-orientated nursing
able to:	Bacc. Essentials: I, II, III, IV,			care plan.
	V, VI, VII,			
		1	1	

	List sources of information that can be used to identify group and community health problems.  Describe methods to gain input from target populations to define the scope of a health problem.  Identify change strategies that maximize cooperation of target populations.	Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10  IPEC: 1, 2, 3, 4		
3 01/24	The Changing US Health and Public Health Care Systems: By the end of the class students will be able to:  Describe the current organizational structure of the United States' health care system, including public health.  Identify the functions of key governmental and quasi-governmental agencies that affect public health systems and nursing, both around the world and in the United States  Analyze the trends and issues influencing health care economics and delivery of public health services.  Describe how health care system funding and financing influences community/public health nursing practice.  Compare and contrast different payment systems for health care services, including managed care, feefor-service, and single-payer systems.	Rector C, 28, Ch. 6 partial reading and course points (see canvas and course points assignment) Ch. 13 entire chapter + course points. Healthy People 2030  Addresses CCR1491(4)(I) Legal and health care financing issues	Quiz 1 Virtual experience #8 Correctional Facility Nursing: Promise Heights Jail	Virtual experience #8 Correctional Facility Nursing: Promise Heights Jail

		I .		I
	Define health policy and explain how it is established.  Identify three ways a PHN can engage in policy activism.  Describe three components of the Patient Protection and Affordable Care Act that impact the health of the public.  COMMUNITY/PUBLIC HEALTH SETTING Public health and Private settings By the end of the class students will be able to:  Compare and contrast the current public health system with the model of primary health care  Compare and contrast common roles and functions of C/PHNs, school nurses, and correctional nurses.	Course point public and private settings for community health nursing  QSEN:1, 2, 3, 4, 5, 6  Bacc. Essentials:I, II, III, IV, V, VI, VII, VIII,  Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10  IPEC: 1, 2, 3, 4		
4	Epidemiology	Chapters 7, 8 and 29		
01/31	By the end of the class students will be able to:		community needs assessment steps in practice	
	Discuss key highlights of the history of epidemiology  Apply the epidemiologic triangle (host, agent, and environment model) to a common public health problem.	Additional resource posted in the point and canvas CCR1491(4)(B) Surveillance and epidemiology: chronic and communicable diseases  Addresses CCR1491(4)(E)	Primary and secondary data Including windshield survey  Solve the outbreak https://www.cdc.gov/digital-social-media-	

	Define immunity and compare and	Research methodology and	tools/mobile/applications/sto/web-	
	contrast passive, active, cross-, and	statistics	app.html	
	herd immunity.		Breathless in the Midwest	
	Identify the four stages of a disease		Breatness in the Midwest	
	or health condition.			
	or riodian contains.		Covid surveillance project	
	Discuss the types of epidemiologic		Monkeypox	
	studies that are useful for researching		TB	
	aggregate health and the process for			
	conducting epidemiologic research.			
	Communicable diseases/ Surveillance			
	and Quality			
	By the end of the class students will be			
	able to:			
	Define the nurse's role in communicable disease control.			
	communicable disease control.			
	Describe the three modes of			
	transmission for communicable			
	diseases.			
	Identify four major communicable			
	diseases in the United States.			
	Explain the significance of			
	immunization as a communicable			
	disease control measure.			
	Define public health surveillance.			
	·			
	List types of surveillance systems.			
	Identify steps in planning, analyzing,			
	interviewing, and evaluating			
	surveillance.	Addresses CCR1491(4)(K)		
		Case management/care		
		coordination		
				1

	Recognize sources of data used when investigating a disease or condition outbreak.  Describe role of the nurse in surveillance and outbreak investigation.  Relate the nurse's role in investigation to the national core competencies for public health nurses  COMMUNITY/PUBLIC HEALTH SETTING  Public health and Private settings  By the end of the class students will be able to:  Discuss key aspects of the private health care system.  Explain the role of the occupational and environmental health nurse and other members of the occupational health team in protecting and promoting workers' health and safety	QSEN:1, 2, 3, 4, 5, 6  Bacc. Essentials: I, II, III, IV, V, VI, VII, VIII, IX  Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10  IPEC: 1, 2, 3, 4	The point: family as a client case study. And article "USING SPIRITUAL INTERVENTIONS IN DIABETES PREVENTION"	
5 02/07	Family as a client By the end of the class students will be able to:  Identify the stages of the family life cycle and the developmental tasks of a family.  Discuss how a family's culture influences its values, behaviors, and roles.  Describe the functions of a family.	Chapter 14  CCR1491(4)(H) Assessment of health needs of individuals and families, to include environment, and interventions across the lifespan	Disaster Class discussion: Are you ready? Disaster Assignment Online activity: Explore the resources on the California Department of Social Services website at <a href="https://cdss.ca.gov/">https://cdss.ca.gov/</a> info resources/guides	Disaster presentation Assignment

NUR 290

	Discuss how the core functions of public health can be applied to environmental health		public health can be applied to	Chapter 9,			Commented [n5]: Lecture and discussion about environmental influences affecting human health and disease.
--	--	--	---------------------------------	------------	--	--	---

Discuss the community/public health nurse's role in reducing and managing environmental risk.  Describe the skills needed by nurses practicing in environmental health and apply the nursing process to the practice of environmental health  Know which disciplines work most closely with nurses in environmental health.		
	Rector Chapter 17,	
Describe legislative and regulatory policies that have influenced the effect of the environment on health and disease patterns.	CCR1491(4)(L) Emergency preparedness and response	
<b>Disaster Preparedness</b> By the end of the class students will be able to:	QSEN:1, 2, 3, 4, 5, 6	
Describe the characteristics of disasters, including their causation, scope, and intensity.	Bacc. Essentials: I, II, III, IV, V, VI, VII, VIII, IX	
Discuss three factors contributing to a	Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10	
community's potential for experiencing a disaster.	IPEC: 1, 2, 3, 4	
Identify the four phases of disaster management.		
Describe the role of the community/public health nurse (C/PHN) in preventing, preparing for, responding to, and supporting recovery from disasters.		

Commented [CV6]: Interprofessional collaborative for environmental health factors.

6 02/14	Global health By the end of the class students will be able to:  Describe a framework for delivering community-based nursing care within the context of global health.  Explain how epidemiologic and demographic transition theories assist in understanding the impact of disease patterns on the health of a community, country, or region.  Define the global burden of disease according to common social determinants of health.  Describe the major health care trends currently affecting the world's populations.  Explain how a focus on primary health care provides the basis for health promotion and disease prevention.  Describe issues of global health conduct and regulation, including ethical concerns.	Chapter 16  The point: Global Health and international Community health nursing  Public health nursing at the global health module  QSEN:1, 2, 3, 4, 5, 6  Bacc. Essentials: I, II, III, IV, V, VI, VII, VIII  Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10  IPEC: 1, 2, 3, 4	Quiz 2 Global Health Round table Guests participants  Working on community needs assessment	Disaster presentation Assignment	Commented [CV7]: community needs ass
7 02/21		Holiday	<u> </u>		
8 02/28	FOUNDATIONS OF COMMUNITY/ PUBLIC HEALTH NURSING Evidenced-based practice and Ethics By the end of the class students will be able to: Discuss the concept of evidence- based practice (EBP) in community/public health.	Ch. 4,  The point: Evidenced-based practice and Ethics in community health nursing and other modules	Class discussion focus: Ethical and cultural influence in public health nursing	Faith-Based Paper Due Friday 03/03 by11:59 pm	

Commented [CV7]: Student continue working on their community needs assessment.

NUR 290

List the necessary steps in the process of EBP.  Analyze the potential impact of research on community/public health nursing practice.  Identify the community/public health nurse's role in conducting research and using research findings to improve his or her practice.  Discuss the application of ethical principles to community/public health	Addresses CCR1491(4)€ Research methodology and statistics		
nursing decision-making.  Analyze codes of ethics for nursing and for public health.  Describe how ethics is part of the core functions of nursing in public health.  Use a decision-making process with and for community/public health clients that incorporates values and ethical principles.  Transcultural Nursing	Ch.5	Cultural competency training online	
By the end of the class students will be able to:  Define and explain the concept of culture.  Discuss ways in which culture can affect nursing practice.  Discuss the meaning of cultural diversity and its significance for community/public health nursing.	Addresses CCR1491(4)(D) Multicultural nursing concepts  QSEN:1, 2, 3, 4, 5, 6	Work in pairs: Conduct a cultural assessment of a person from a cultural group other than yours.	

Commented [n8]: Carol:

Class discussion focus: Ethical and cultural influence in public health nursing. Students start to consider which ethical principles are influenced when poverty and health disparities exist.

Commented [n9]: Carol Self-reflection on theological motivations for serving the underserved vulnerable populations they have identified. How has the experience informed the way students will provide care in their nursing careers?

	Identify five characteristics shared by all cultures.  Conduct a cultural assessment.  Apply principles of transcultural nursing in community health nursing practice  Develop culturally competent nursing interventions to promote positive health outcomes for clients.	Bacc. Essentials: I, II, III, IV, V, VI, VII, VIII, IX  Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10  IPEC: 1, 2, 3, 4		
9 03/07	VULNERABLE POPULATIONS By the end of the class students will be able to: Define the term vulnerable populations and describe selected groups who are considered vulnerable.  Describe factors that led to the development of vulnerability in certain populations.	Ch. 23, 18  Addresses CCR1491(4)(J) Family violence, e.g., child, adult, domestic, elder abuse, etc., prevention, detection, intervention, treatment, and California reporting requirements-	Case Study: Child Abuse and neglect, immediate nursing interventions and short and long term case management  Assignment: Case study, mandatory reporting of child abuse event. Family violence	
	Describe three types of health disparities.	Addresses BPC2818(3) Prevention of abuse and neglect of children, elders, and spouses	Class discussion: Social and Community Factors influencing violence	
	Examine ways in which public policies affect vulnerable populations and can reduce health disparities in these groups.  Examine the individual and social	Addresses BPC2818(3) Prevention of abuse and neglect of children, elders, and spouse-1hr		
	factors that contribute to vulnerability.  Describe strategies that nurses can use to improve the health status, decrease health disparities of vulnerable	Addresses CCR1491(4)(J) Family violence, e.g., child, adult, domestic, elder abuse, etc., prevention, detection,		

populations and promote vulnerable	intervention, treatment, and		
populations empowerment.	California reporting requirements-2hr		
Identify two strategies to solicit and evaluate input from vulnerable populations when planning health care programs and services.	QSEN:1, 2, 3, 4, 5, 6		
Violence and abuse By the end of the class students will be able to: Discuss the scope of the problem of violence in American communities, and describe at least three factors in most communities that encourage violence and human abuse.	Bacc. Essentials: I, II, III, IV, V, VI, VII, VIII, IX  Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10  IPEC: 1, 2, 3, 4	Lippincott simulation and assignment Virtual experience and real world experience	
Discuss community risk factors and protective factors related to violence.			
Identify common predictors of potential child abuse and indicators of its presence.			
Define the four general types of violence against children and specific abusive situations (neglect, physical, emotional, and sexual)			
Define intimate partner violence and explain the stages of the circle of violence.			
Define and describe the growing community health problem elder abuse;			

Commented [CV10]: Lecture and class discussion on strategies nurses can use to improve the health status and decrease health disparities of vulnerable populations.

	Discuss elder abuse related vulnerability factors and prevention measures.  Describe initial steps for reporting elder abuse.  Use the nursing process to outline nursing actions in response to acts of			
	violence.			
10 Spring Break 03/13 to 03/17		SPRING BRE	EAK	
11	Behavior Change,	Chapter 11,	QUIZ 3	
03/21	Health promotion and Health Literacy By the end of the class students will be able to:  Describe social determinants of health and how each relates to health inequities and change through education.  Explain the three stages of change and planned change strategies.  Describe the C/PHN role as an educator in promoting health and improving quality of life. Identify educational activities for the nurse to use that are appropriate for each of the three domains of learning.  Identify health teaching models for use when planning health education activities.	Addresses CCR1491(4)© Health promotion and disease prevention in children-1hr  Addresses CCR1491(4)(F) Health teaching concepts and strategies		

	Develop teaching plans focusing on primary, secondary, and tertiary levels of prevention for clients of all ages and learning needs.  Behavioral health in the community By the end of the class students will be able to:  Identify key mental disorders and describe their effect on individuals and the community.  Identify commonly used substances and their effect on health.  Follow the steps of the nursing process in detection of at-risk alcohol use and management of that risk.  Use prevalence data to inform the development of individual- and community-level interventions to address mental health and substance use disorders.	Ch. 25 The point  QSEN:1, 2, 3, 4, 5, 6  Bacc. Essentials: I, II, III, IV, V, VI, VII, VIII, IX  Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10  IPEC: 1, 2, 3, 4	
12 03/28	AGGREGATE POPULATIONS Maternal child needs By the end of the class students will be able to: Identify major health problems and concerns for childbearing women, infants, toddlers, and preschoolers globally and in the United States.  Discuss major risk factors and special complications for childbearing families.  Describe various roles of a public and community/public health nurse	Chapter 19, 20,  Addresses BPC2818(4) Outreach screening, case management, resource coordination and assessment, and delivery and evaluation of care for children and families-1hr  CCR1491(4)(K) Case management/care coordination	

	(C/PHN) in serving the maternal—child population.  Describe nursing measures to promote child and adolescent health within the community.  Describe nursing measures to promote child and adolescent health within the community  School age children and adolescents  By the end of the class students will be able to:  Explain how poverty is a significant social determinant of health in children and adolescents.  Identify major health problems and concerns for U.S. school-age children and adolescents.  Describe and analyze mortality and injury trends among school-age children and adolescents.  Evaluate Healthy People 2030 objectives affecting children and adolescents and the barriers that may be involved in attaining these objectives.	QSEN:1, 2, 3, 4, 5, 6  Bacc. Essentials: II, III, IV, V, VI, VII, VIII,  Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10  IPEC: 1, 2, 3, 4	
13 04/04	AGGREGATE AND VULNERABLE POPULATIONS Adult Health By the end of the class students will be able to:  Discuss the concepts of life expectancy, health disparities, and	Chapter 21	

health literacy and how they apply to adult women and men living in the United States.  Discuss the major chronic illnesses found in adult women and men in the United States.  Discuss factors affecting the health of adult women and men in the United States.  Describe the role of the community health nurse in promoting the health of adult women and men across the life span.		
Clients with disabilities Discuss the national and global implications of disabilities.  Describe the economic, social, and political factors affecting the well-being of individuals with disabilities and their families.  Provide an example of primary, secondary, and tertiary prevention practices for individuals with disabilities.  Describe the laws that protect individuals with disabilities, such as the Americans with Disabilities Act.  Discuss the benefits of universal design for all persons.	Ch. 24 The point  QSEN:1, 2, 3, 4, 5, 6  Bacc. Essentials: I, II, III, IV, V, VI, VII, VIII, IX  Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10  IPEC: 1, 2, 3, 4	

	Explain the role of the community health nurse when working with clients with disabilities.			
	VULNERABLE POPULATIONS		QUIZ 4	
14 04/11	Working with the homeless  By the end of the class students will be	Chapter 26, The point	Assignment: Homeless of SB initiative	
04/11	able to:	The point	l loneless of 3B illitiative	
	Define the concept of homelessness.		The migrant farmworker as a vulnerable population	
	Describe the demographic			
	characteristics of the homeless living			
	in the United States (particularly California and Santa Barbara and			
	Ventura counties)			
	Discuss factors predisposing persons			
	to homelessness.			
	Explain the effects of homelessness on health.			
	Analyze the extent and adequacy of public and private resources to combat the problem of homelessness.			
	Assess your beliefs and values toward homelessness.			
	Propose community-based nursing interventions to facilitate primary, secondary, and tertiary prevention in addressing the problem of homelessness			
	Rural, Migrant and Urban Communities By the end of the class students will be able to: Define the terms rural, frontier, migrant, and urban.	Chapter 27		

Commented [CV11]: Students complete their assessments, research, and prepare written and oral presentations for their faculty and peers. Written paper includes a reflection on how the student was affected by the experience and how their experience will inform their nursing career.

15	Discuss the population characteristics of rural residents.  Describe barriers to health care access for rural clients.  Describe the lifestyle of migrant farm workers and their families.  Identify at least three health problems common to migrant workers and their families.  Discuss barriers and challenges to migrant health care.  Identify common health disparities found among rural and urban populations.  Explain the concept of social justice and how it relates to public health nursing in rural and urban areas.  Compare and contrast the challenges and opportunities related to rural and urban community health nursing practice	QSEN: 1, 2, 3, 4, 5, 6  Bacc. Essentials: II, III, IV, V, VI, VII, VIII,  Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10  IPEC: 1, 2, 3, 4	ATI proctored exam	Virtual experience
15 04/18	AGGREGATE POPULATION Older adults By the end of the class students will be able to: Describe the global and national health status of older adults.  Identify at least three common misconceptions about older adults.	Chapter 22	ATI proctored exam	Virtual experience the point: Home safety and the aging adult

_			
l	Describe characteristics of healthy		
ı	older adults.		
ı			
ı	Descride an execute of arises and		
ı	Provide an example of primary,		
ı	secondary, and tertiary health		
ı	promotion and prevention practices in		
ı	the older adult population.		
	i i		
ı	Identify four chronic conditions most		
ı	commonly found in the older adult		
ı			
ı	population.		
ı			
ı	Describe various types of living		
ı	arrangements and care options for		
ı	older adults		
ı			
ı	Describe the importance of integrating		
ı	palliative care into aspects of care for		
ı			
ı	older adults.		
ı	COMMUNITY/PUBLIC HEALTH		
ı	SETTING		
	Home health and hospice care	Chapter 30	
	By the end of the class students will be	-	
ı	able to:		
ı	Describe reimbursement and payment		
	models for home health care and		
ı			
ı	hospice programs.		
ı			
	Explain family caregiver burdens of	QSEN:1, 2, 3, 4, 5, 6	
ı	providing home and hospice care.		
I		Bacc. Essentials: I, II, III, IV,	
	Describe essential characteristics of	V, VI, VII, VIII, IX	
ı	home health and hospice nursing	·, · · · , · · · · , · · · · · , · · · · · ·	
I		Demoine: 4 2 2 4 5 C 7 C	
ı	practice.	Domains: 1, 2, 3, 4, 5, 6, 7, 8,	
I		9, 10	
I	Identify unique challenges of home		
1	and hospice nurses.	IPEC: 1, 2, 3, 4	
1			
١			

# NUR 290

16 04/25	Contrast the goals of home health care and hospice.  Explain the gaps and future needs of home health care and hospice in the United States.	QSEN:1, 2, 3, 4, 5, 6  Bacc. Essentials: I, II, III, IV, V, VI, VII, VIII, IX  Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10  IPEC: 1, 2, 3, 4	Community needs assessment presentations	Community needs assessment presentations
05-03 12:00 to 2:00 pm	Finals week		Final Exam	

#### **Course Assignements Description and Grading Rubrics**

Assignments descriptions and submission links will be found in Canvas under the *Assignments* module. Reminders will be provided in the related weekly folder and week overview.

#### Syllabus Contract (last page of this syllabus)

with an opportunity to self-assess your understanding of the syllabus and sign the syllabus contract for accountability purpose. This is part of the course expectations.

#### Student Learner Needs survey and check in

To ensure your needs are met I develop a survey that will provide you with an opportunity to share your specific needs and concerns and would like to check in with you individually throughout the semester. Appointments will be available for this matter.

#### **Community Assessment Project and Intervention**

(Individual and Group Assignment)

This group project is a major part of the community/public health course. It includes assignments in both the theory and clinical portion of the course. Details will be specified in Canvas and in the clinical portion of the syllabus. For this project you will be assigned to a group based on your clinical rotation section. Instructions on how to find your group is available in Canvas. Each group will consist of 4-6 students from the same clinical course section. Each student is to contribute equally to the group work. All group activities must be documented, and progress submitted under the related Canvas submission link. Lack of participation to group activities will lead to point deduction.

#### **Project Goals:**

- 1) Apply knowledge gained from the major community/public health concepts, research, and experience working in the community/public health setting.
- 2) Assess the community as a client to identify health related problems of the aggregate population
- Formulate community nursing diagnoses based on your community needs assessment; (the nursing diagnosis should address on of your 3 most critical identified problems or priority areas)
- 4) Provide goals, plan and intervention for one nursing diagnosis. You will need to describe related Healthy People 2030 goals and objectives, public health core functions and essential public health Services and public health interventions (intervention wheel).
- 5) Implement one intervention for the selected health concern
- 6) Analyze the outcomes of intervention to determine if the measures implemented were successful and useful to the population under consideration
- 7) Include how this project/assignment and course has informed your care moving forward in your nursing careers.

Commented [MOU12]: This project is so large (true and valid community assessments take an interprofessional team and several months to complete), each student will become a member of the team to bring their perspective to the group to identify the priority community need, community nursing diagnosis, intervention, and expected outcome.

NUR 290

8) Present your project to the class.

While this is a group assignment each student's points will be based on their individual work for the project (worth 75%) and the group grade (worth 25%).

# Community/Public Health Community Health Needs Project Pesentation

CATEGORY	Exceeds standards 90 to 100%	Meets standards 80 to 89%	Approaches standards 76 to 79%	Below standards 75% and below
Oral Presentation/ Delivery	like, you guys), within	time; could use more rehearsal; each filler work will be a deduction of 1 point use of	Students are somewhat prepared. Difficult to hear, speaks at a fast rate' lacks rehearsal; no use of filler words (umm, like, you guys), within time limits; looks at notes instead of audience majority of time; each filler work will be a deduction of 1-point use of filler words (umm, like, you guys), within time limits; Establish eye contact sometimes. Team cooperation sometimes smooth.	Students do not seem prepared. Volume is too soft to be heard. Establish no eye contact. Partners do not seem cooperative. each filler work will be a deduction of 1 point use of filler words (umm, like, you guys),
Content - Accuracy	All content on slides is accurate. There are no factual errors.  Assessment, diagnosis, planning, outcome, implementation, and evaluation are presented with time frame and importance of information taken into consideration; Includes Muecke chart, Healthy People 2030 goals and objectives, public health core functions & essentials, and intervention wheel	Most of the content is accurate. There are 1 or 2 factual errors. One of highlighted content is missing or not presented in presentation, all assessment is presented	There are many inaccuracies in the content. Two of the highlighted are missing or not presented; missing several assessments	Too much time spent on some details of assessment with no time for other aspects of assignment such as diagnosis, Healthy People 2030 and interventions.

Use of Graphics	All slides have graphics to support all information.	At least 10 of the slides have graphics to support all information	Some of the slides have graphics but don't support the information.	Many of the slides have no graphics.
Text - Font Choice & Formatting	Font formats (e.g. color and style have been carefully planned to enhance the readability and content on all slides.		Font formats (e.g. color and style have been carefully planned to enhance the readability and content in 50% of slides.	Font formats (e.g. color and style have not been carefully planned to enhance the readability and content on the slides (less than 50%).
Spelling and Capitalization	Project has no misspellings and/or capitalization errors on all slides.	Project has between 1-2 misspellings and/or capitalization errors on all slides.	Project has between 3-4 misspellings and/or capitalization errors on all slides.	Project has more than 5 misspellings and/or capitalization errors.
Organization	Content is well organized using headings or bulleted lists to group related material on <b>all</b> slides.	Content is well organized using headings or bulleted lists to group related material on many of the slides.	Content is well organized using headings or bulleted lists to group related material on only some of the slides.	Content is not well organized.
Attractiveness	Makes excellent use of font, color, graphics, etc. on all of the slides to enhance the presentation.	font, color,		There is very little evidence of good use of font, color, graphics, etc. on all of the slides to enhance the presentation.

#### **Disaster Assignment**

The purpose of this assignment is to assist students in understanding the different layers of partnership in community/public health nursing and the process of disaster management. It includes preparedness, response, recovery and mitigation (prevention).

You can search the web, use pee-reviewed articles, make calls to interviews players, visit the site (if applicable). Be creative in using picture, videos, role-play....

#### **Instructions for Disaster presentation:**

Each group will pick a disaster and explore the response, recovery, preparedness and mitigation. (Examples and sign up will be provided in week 1). Presentation should answer the following questions:

- 1) Describe the disaster (Event) dates, location..., damages, number death....
  - What was and how was the disaster response organized?
- Describe the impact of the disaster on the community from a public health standpoint (immediately after the event—acute and long term impact)
  - What were the public health risks? (disease outbreak, homeless, hospital admission...)
  - What was the cost of damage/ response?
  - Who was involved in the response: local, (community based organizations, governmental agencies), state, federal levels)
- 3) Analysis answering the following question
  - Was the community/county/country prepared?
  - Which organizations were involved?
  - Did their initial emergency preparedness plan allow them to respond appropriately (promptness in responding, disaster responders' capacity, infrastructure to accommodate needs...)
  - Has the community recover from the disaster?
  - How did the event modify the disaster preparedness? (Lessons learned)
- 4) Identify and discuss the different roles of nurses during the related disaster response (community health nurse, public health nurse, RN)

Disaster Presentation in class	Points Possible	Points Earned
Disaster description	20	
A general description of the disaster event is provided (dates, location,		
damages, number death)		
Impact of the disaster:	25	
The impact of the disaster on the community from a public health		
standpoint is discussed (short and long term)		
<ul> <li>Public health risks</li> </ul>		
<ul> <li>Cost of damage/response</li> </ul>		
<ul> <li>Level of response</li> </ul>		
Analysis: disaster response is discussed	25	
<ul> <li>Level of preparedness is discussed (county, state, federal;</li> </ul>		
community)		
<ul> <li>Community response is discussed</li> </ul>		
<ul> <li>Lessons learned are addressed</li> </ul>		
The different roles of nurses during the related disaster response	20	
are identified and discussed		
Presentation and Format Presentation:	10	
Presentation is creative and interactive		
Presenters are knowledgeable: cover topic with additional information		
from slide notes		

## NUR 290

Each presenter demonstrates equal contributions in preparation and delivery of project		
APA format 2 to 4 peer-reviewed journals references are used		
Citations are used appropriately and APA format		
Total	100	

**NUR 290** 

## Clinical syllabus

Faculty: TBD Clinical Site: TBD Faculty: TBD Phone: TBD Email: TBD Office hours: TBD

## Clinical objectives:

- Apply evidence-based, compassionate care to communities and populations regionally, across the state, nation, and globe.
- Apply knowledge gained from the major community/public health concepts, research, and experience working in the community/public health setting
- 3) Describe the roles and interventions of a community/public health nurse in multiple settings
- 4) Conduct a Community Needs Assessment on an aggregate vulnerable (at risk) population within Santa Barbara and Ventura counties and demonstrate related steps (community health diagnosis, goal setting, plan and implementation of community health interventions and outcome evaluation)
- Learn about community resources to provide appropriate referrals to underserved populations
- 6) Examine the political implications (health policies) and related leadership and partnership to promote diverse, equitable, inclusive and quality health care in the community/public health setting.
- Evaluate the child, adult, and elderly abuse reporting guidelines in community/public health setting.

## **Assignments:**

#### **Learning Objectives**

Write 4 learning objectives related to <u>what you personally want to learn</u> in your clinical time at your agencies. These objectives are not related to and are different from the course assignments.

#### Examples:

- "Implement two teaching methods for use of referrals/resources for the care of homeless clients within six weeks"
- "Participate in the assessment of a family in a home visit within six weeks"

When you write your Learning Objectives, think of the SMART Principle:

**Commented [n13]:** Supports objectives for Serving Society; Enacting Justice

- S=specific,
- M=measurable,
- A=attainable,
- R=realistic.
- T=timed.

Some of the common action verbs you can use include but are not limited to: Apply, Demonstrate, Examine, Organize, Relate, Show, Use, Analyze, Compare, Detect, Distinguish, Identify, Recognize, Select, Describe, Instruct, Evaluate, Write and Explain

Role Performance is a hands-on experience; Credit for observational learning is not given. There might be some observational learning in the beginning during orientation, but after that, you need to be actively involved in Methods of Care including the following:

- Direct Care,
- Guiding,
- Supporting,
- Teaching,
- Developmental Environment establishing/maintaining an environment conducive to achieving health, maximum growth and development fostering selfcare of individuals, families, groups, and communities.

FYI: You are to state your compliance to Westmont College ABSN Nursing Program HIPAA policy each clinical day on your journal.

See HIPAA compliance section at the end of the syllabus page.

## Community Needs Assessment Directions (10 clinical hours) <u>Group Contract and at-risk population selection (50 Pts)</u>

Each member of the group will contribute to a group contract.

A group contract is a plan, model or outline, setting guidelines within your group. This contract should foster open communication, encourage mutual respect, and determine participant roles. You should consider including some of the following:

- member strengths, limitations, and values
- team member roles and accountabilities
- communication style and communication plan
- leadership style
- strategies for successful team functioning
- how you plan to accomplish assignments
- managing conflict, such as communication issues, late work, or workload balance.

This group contract is your group's creation. The expectation is for you to make a plan your group can follow for success.

#### At-risk population selection (MUST BE INCLUDED IN THE CONTRACT):

For your community needs' Assessment, you will need to **select a community/city** and **identify an at-risk population** in the community. Examples of local at-risk populations include but are not limited to homeless individuals, frail elderly, LGBTQIA+ individuals, farmworkers, recent immigrants, incarcerated individuals, victims of crime, etc.

Any group member may contact the instructor directly in confidence if there are concerns about the dynamics of the working group or if a team member is not fulfilling his/her role.

# Section(s) of the project each member will be contributing to (MUST BE INCLUDED IN THE CONTRACT):

Each group member must identify which part they will contribute to and specify it in the contract.

Please submit your group contract on or before week 2 Please submit one contract per group to your clinical instructor via the appropriate canvas assignment submission link.

# Community Assessment Group Project and Intervention Individual Portion (350 points):

## Assessment (100 points):

The Community needs assessment must lead to an in-depth description of the elected community and population.

- Identify the social determinants of health (SDOHs) that are impacting the health of your population. Use the definition used by Healthy People 2030 for identifying the SDOHs for your chosen population
  - (https://health.gov/healthypeople/objectives-and-data/social-determinants-health)that are impacting the health of your population.

## Consider all of the following:

- a. Housing
- b. Education
- c. Employment
- d. Structural Barriers to Healthcare
- e. Availability and sufficiency of resources
- f. Presence of biases such as racism, homophobia, and immigration status that are impacting their ability to access services and/or community resources.

## 2. Windshield Survey

The community needs assessment includes a windshield survey of your community. A windshield survey is a drive around to various parts of your community. The following key community characteristics must be assessed:

(For these sections it is important to focus on social determinants health)

#### 1 Physical environment

- a. Inspection (location, size, layout and boundaries, overview of what is in the community)
- b. Vital signs (climate, geography, population density)
- c. Systems (land use, age of homes, condition and types of homes and areas, pets)
- d. Windshield survey data for subsystem

#### 2. Health services

- a. Windshield survey data for subsystem
- b. Health services data (include mental and dental health care and data on access to services)

Intra and extra community

## 3. Social services

- a. Windshield survey data for subsystem
- b. Social services data (include data on access to services)
- 1) Intra and extra community

## 4. Economics

- a. Windshield survey data for subsystem
- b. Economic data
- 1) Financial characteristics of households (compare to other geographies)
- 2) Businesses

## 5. Safety

- a. Windshield survey data for subsystem
- b. Protection services
  - 1) Fire protection
  - 2) Police protection
- c. Sanitation (e.g., air quality; water sources, quality, and treatment; solid waste)
- d. Community measurements of safety (e.g., crime, accidents)

## 6. Transportation

- a. Windshield survey data for subsystem
- b. Transportation services
  - 1) Private
  - 2) Public (e.g., bus routes, schedules, fares; roads, highways)

## 7. Politics and government

a. Windshield survey data for subsystem

b. Political data (political party data, voting, politicians, political boundaries, evidence of political activism, registration)

#### 8. Communication

- a. Windshield survey data for subsystem
- b. Formal communication
  - 1) Newspapers (note languages)
  - 2) Radio and television stations (note languages)
  - 3) Phone (cell and landlines) and Internet access
- c. Informal communication: (Bulletin boards, posters, signs, newsletters, locations and languages)

#### 9. Education

- a. Windshield survey data for subsystem
- b. Educational status (levels of education and languages spoken)
- c. Educational resources including libraries (include access to sources) Intra and extra community

#### 10. Recreation

- a. Windshield survey data for subsystem
- b. Recreational facilities and activities (include access to)

#### 11. Religion/Spirituality

- a. Windshield survey
- b. Church communities, including frequency of services, demographics of attendees, and

programs offered by religious community

The presentation of the assessment must include:

- a. Definition and description of the population
- Results of the windshield survey of a geographic community in which the population lives.
- Brief description of the SDOHs you identified that are impacting the population.

You are required include vital statistics information including morbidity and mortality data, if available.

3. Interview a minimum of five members of the community (include members of the community who have different backgrounds (socioeconomic status, educational attainment, employment history) to identify their priority needs, what they perceive is negatively impacting their health, and what community resources they have been able to access. Community members should represent the experiences of different age groups and gender.

- 4. **Interview a minimum of three community stakeholders** such as clergy, social workers, public health nurses, and other service providers to identify their priority areas for change.
- 5. Compare information gathered from your interviews regarding the social determinants of health that are impacting your selected population with data from a reliable source: such as the Local Health Plans of California, Centers for Disease Control, and Healthy People 2030 so that you are better able to prioritize the intervention you will develop for this assignment.

#### Analysis and Diagnosis (50 points)

- Develop a Priority Matrix of the social determinants of health you identified. The criteria to use for weighting and rating the concerns are (Refer to Muecke's article table 3 for example):
  - · Community awareness of the problem
  - Community motivation to resolve the problem
  - Nurse's and the health care team's ability to influence a solution
  - · Availability of expertise
  - Availability of resources
  - Severity if the problem remains unresolved
  - How rapidly can the problem be resolved
- 2. Identify three priority health issues. Pick one and formulate a community health diagnosis following the Muecke format.

#### Planning (50 points)

- 1. Outcomes (SMART): Develop at least **3 SMART outcomes/goals** following your assessment and how they relate to Healthy People 2030 goals. Look for the below information in Healthy people 2030.
  - a. Healthy People 2030:
    - 1. Overarching Goal
    - 2. Focus Area and Goal
    - 3. Development Objective or research objective, including number
  - 2. Pick **one goal** and come up with at least 3 interventions. Write the community/public health nursing interventions with rationale (evidence-based support) for each outcome using:
    - a. Essential Public Health Services

#### b. Minnesota Public Health Intervention Wheel

You will pick **one intervention** to implement for the rest of the assignment and describe planning steps: how you would plan and prepare the intervention.

## Implementation (100 points)

1. Description of how you would implement the planned intervention

#### Evaluation (50 points)

- Develop an evaluation plan. Include in the plan input, process and outcome objectives.
- 2. Describe how you would determine if your objectives were met during implementation and at the conclusion of the intervention.

As stated above 75% of the points will come for your individual work on the project and 25% of your grade is based on the group grade. Each group member will provide a summary of the work done on the project. The summary must include detailed information about the hours contributed to each component of the project for the individual and the combined group.

## Community Needs Assessment Presentation (100 points):

Each group will provide a 20 to 30 min presentation of their community needs assessment. The presentation will include:

- Assessment (windshield survey main results and summary of interview results),
- Diagnosis and analysis including Muecke chart and community health diagnosis in Muecke format and the three priority problems you identified
- Outcomes/Goals: SMART format and Healthy People 2030 goals/focus areas or objectives they align to.
- The three community/public health interventions you came up with (related Minnesota wheel interventions, and essential public health services)
- Planning steps: how you would plan and prepare to implement the intervention.
- Implementation: Description of how you would implement the planned intervention including concrete logistics
- and evaluation plan: plan input, process and outcome objectives and how you would determine if goals were met.

Point breakdown (At the bottom of each slide please add name of student): 75% individual (graded by faculty) 25% group: points from faculty grading

Clinical schedule: see updated one

	schedule: see updated one	
Week	Patient care focus	Preconference Lunch Post-conference
1	Orientation and review of clinical syllabus	Skills lab on campus
2	Clinical rotations to home health, hospice, public health clinics and/or programs, School, Outreach programs	
3	Clinical rotations to home health, hospice, public health clinics or programs, Harding St. School, Outreach programs through Social Entrepreneurial Program	
4	Clinical rotations to home health, hospice, public health clinics or programs, Harding St. School, Outreach programs through Social Entrepreneurial Program	
5	Clinical rotations to home health, hospice, public health clinics or programs, Harding St. School, Outreach programs through Social Entrepreneurial Program	
6	Clinical rotations to home health, hospice, public health clinics or programs, Harding St. School, Outreach programs through Social Entrepreneurial Program	
7	Clinical rotations to home health, hospice, public health clinics or programs, Harding St. School, Outreach programs through Social Entrepreneurial Program	
8	Clinical rotations to home health, hospice, public health clinics or programs, Harding St. School, Outreach programs through Social Entrepreneurial Program	
9	Clinical rotations to home health, hospice, public health clinics or programs, Harding St. School, Outreach programs through Social Entrepreneurial Program	
10	Clinical rotations to home health, hospice, public health clinics or programs, Harding St. School, Outreach programs through Social Entrepreneurial Program	
11	Clinical rotations to home health, hospice, public health clinics or programs, Harding St. School, Outreach programs through Social Entrepreneurial Program	

46

12	Clinical rotations to home health, hospice, public health clinics or programs, Harding St. School,	
	Outreach programs through Social Entrepreneurial	
	Program	
13	Clinical rotations to home health, hospice, public	
	health clinics or programs, Harding St. School,	
	Outreach programs through Social Entrepreneurial	
	Program	
14	Clinical rotations to home health, hospice, public	
	health clinics or programs, Harding St. School,	
	Outreach programs through Social Entrepreneurial	
	Program	
15	Clinical rotations to home health, hospice, public	
	health clinics or programs, Harding St. School,	
	Outreach programs through Social Entrepreneurial	
	Program	
16	Clinical Evaluations	

## Clinical Log

Faculty: TBD Clinical Site: TBD Faculty: TBD Phone: TBD Email: TBD Office hours: TBD

\*\*Please refer to the Student Handbook, Clinical Policies for dress code and clinical conduct in the clinical setting

There are 90 clinical hours for this course. The clinical hours should be divided into clinical settings including public health, schools, community clinics and resources, home health and hospice settings, religious institutions (parish nursing), and other public health programs.

Students will keep track of their clinical hours and submit them to their clinical faculty weekly. The clinical log will require the date, setting, preceptors name, priority goal for the experience.

Date	Setting	Preceptor	Priority Goal

## NUR 290

 T.	Ī	

Clinical Faculty Name\_\_\_\_\_

	NUR 290
Clinical Faculty Signature _	Date