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

Certification Criteria

Students will be able to

1. identify theological motivations for service; the needs of the population being served; the effects and affects resulting from those needs; and the causes of those needs, such as involuntary circumstances, individual choices and structural injustices;
2. articulate how they have been affected by their experience (for example, changes in beliefs, attitudes or values) and how their experiences might inform their calling to discipleship, citizenship and future service.

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, health and healthhcare 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 or Vision/Story Board. 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)

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.
2. 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 inter-professional 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.
7. Use informatics and other technology to understand the healthcare needs of community and populations.

PLO and CLO Alignment Table

Program Learning Outcomes	Course Learning Outcomes
1. Exhibit Christian character and servant leadership while providing compassionate care for a diverse population in communities across state, national, and global settings.	1. Exhibit compassionate care to vulnerable populations in the local, regional, national, and global arenas.
2. Evidence-based best practices, critical thinking, and clinical reasoning, inform clinical judgement for the provision of patient-centered, safe, quality care.	2. Develop critical thinking and clinical judgement at the systems level to impact local change in identified areas of healthcare disparities.
3. Create patient education plans that are culturally specific to the patient and that incorporate the family support system.	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.
4. Communicate effectively with the interprofessional team to ensure a wholistic approach to patient-centered care.	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.
5. Continue inquisitive learning by using the Electronic Medical Record and Informatics to meet quality metrics in a variety of healthcare and geographic settings.	7. Use informatics and other technology to understand the healthcare needs of community and populations.
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.	4. Evaluate the importance of understanding child abuse and neglect, it's prevention, detection, intervention, and mandatory reporting responsibility of the nurse.

Required Textbooks

Title	Author	Publisher	ISBN#
Community and Public Health Nursing: Promoting the Public's Health, Tenth Edition	Cherie Rector & Mary Jo Stanley	Wolters Kluwer	978-1-975123-04-8
Nursing Diagnosis textbook of your choice (can be a bundled application on smart phone)			
Nursing Drug textbook of your choice (can be a bundled application on smart phone)			
Publication Manual of the American Psychological Association (7thed.)	American Psychological Association	American Psychological Association	978-143383216

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).

Course Learning Outcomes	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	Class discussion, 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	

*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:
1. 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 grade-reporting 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 quest 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	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**	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

Commented [CV2]: Lecture and class discussion supporting; articulate how they have been affected by their experience (for example, changes in beliefs, attitudes or values) and how their experiences might inform their calling to discipleship, citizenship and future service

Commented [CV3]: Lecture and class discussion supporting; articulate how they have been affected by their experience (for example, changes in beliefs, attitudes or values) and how their experiences might inform their calling to discipleship, citizenship and future service

Commented [CV4]: Lecture and class discussion supporting; articulate how they have been affected by their experience (for example, changes in beliefs, attitudes or values) and how their experiences might inform their calling to discipleship, citizenship and future service

		IPEC: 1, 2, 3, 4		
	☐ Discuss the community/public health nursing competencies			
2 **01/17**	**Community Health Nursing Roles and Theoretical Frameworks** **Community Needs Assessment** **Community as a client** By the end of the class students will be able to: ☐ Describe the characteristics of community/public health nursing practice when the client is a community ☐ Discuss the principles of community public health nursing ☐ Describe the following conceptual models: Minnesota Wheel: Public interventions Model and the Public Health Nursing Practice Model. **Community Needs Assessment** By the end of the class students will be able to:	Rector Ch. 15 Ch. 12 modules via course points **Muecke Article ref:** Muecke M. A. (1984). Community health diagnosis in nursing. Public health nursing (Boston, Mass.), 1(1), 23–35. https://doi.org/10.1111/j.1525-1446.1984.tb00427.x **Healthy People 2030** **CCR1491(4)(H)** Population based practice: assessment and development of community collaboration at the level of systems, community and family/individual	Guest speakers community needs assessment steps in practice	

Commented [CV5]: Introduction to community needs assessment, assignment of clinical instruction
Here it is not only the assessment but the actual method as it is conducted in this field

	☐ Describe methods of community health assessment/community needs assessment			
	☐ Describe the methods for collecting community data	**CCR1491(4)(H)** Assessment of health needs of individuals and families, to include environment, and interventions across the lifespan		
	☐ Describe the nursing process applied to the community as a client including the Muecke Model community health diagnosis	**QSEN:1, 2, 3, 4, 5, 6**		
	Planning Implementing and evaluating community public health programs By the end of the class students will be able to:	**Bacc. Essentials: I, II, III, IV, V, VI, VII,** **Domains: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10**		
	☐ List sources of information that can be used to identify group and community health problems.	**IPEC: 1, 2, 3, 4**		
	☐ 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.			

Commented [n6]: Carol: Lecture and class discussion on understand selected concepts basic to community-oriented nursing practice; community, community client, community health and partnership for health.
Students begin to develop a community-orientated nursing care plan.

Commented [CV7]: Lecture and class discussion supporting; articulate how they have been affected by their experience (for example, changes in beliefs, attitudes or values) and how their experiences might inform their calling to discipleship, citizenship and future service

Commented [CV8]: Lecture and class discussion supporting; articulate how they have been affected by their experience (for example, changes in beliefs, attitudes or values) and how their experiences might inform their calling to discipleship, citizenship and future service

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, fee-for-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

Commented [CV9]: Lecture and class discussion and Triple Aim Paper supporting; articulate how they have been affected by their experience (for example, changes in beliefs, attitudes or values) and how their experiences might inform their calling to discipleship, citizenship and future service

	☐ 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 **01/31**	**Epidemiology** By the end of the class students will be able to:	Chapters 7, 8 and 29	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. ☐ Define immunity and compare and contrast passive, active, cross-, and herd immunity. ☐ Identify the four stages of a disease or health condition. ☐ Discuss the types of epidemiologic studies that are useful for researching aggregate health and the process for conducting epidemiologic research.	Additional resource posted in the point and canvas **CCR1491(4)(B)** Surveillance and epidemiology: chronic and communicable diseases **Addresses CCR1491(4)(E)** Research methodology and statistics	Primary and secondary data Including windshield survey Solve the outbreak https://www.cdc.gov/digital-social-media-tools/mobile/applications/sto/web-app.html Breathless in the Midwest Covid surveillance project Monkeypox TB	
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.			

Commented [CV10]: Lecture and class discussion supporting; articulate how they have been affected by their experience (for example, changes in beliefs, attitudes or values) and how their experiences might inform their calling to discipleship, citizenship and future service

☐ 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. ☐ 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	**Addresses CCR1491(4)(K)** Case management/care coordination **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"	

Commented [CV13]: 1.Lecture, Article and class discussion supporting; identify theological motivations for service; the needs of the population being served; the effects and affects resulting from those needs; and the causes of those needs, such as involuntary circumstances, individual choices and structural injustices;

	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. ☐ Describe the evolution of faith community nursing ☐ Describe and differentiate among the roles of the faith community nurse ☐ 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			
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.	**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:**	Disaster presentation Assignment

Commented [CV11]: Lecture and class discussion on the theology motivation of the faith community nurse, including their unique perspective and understanding of cultural and religious practice that may impact Western Medicine.

Commented [CV12]: Lecture and class discussion on the faith community nurses and/or parish nurse and their understanding of the unique needs of the population being served, the health disparities caused by those needs, and the nurse's role and influence in community needs assessments, intervention, and evaluation.

☐ Discuss how a family's culture influences its values, behaviors, and roles.		Explore the resources on the California Department of Social Services website at **https://cdss.ca.gov/** **info resources/guides**	
☐ Describe the functions of a family.			
☐ Analyze the role of the community health nurse in promoting the health of the family.			
☐ Describe the components of the nursing process as they apply to enhancing family health.			
☐ Identify the steps in a successful family health intervention.			
☐ List at least six specific safety measures the community/public health nurse should take when traveling to a home or making a home visit.	**Chapter 9**		
☐ List the five basic principles the public health nurse should follow when assessing family health.			

	☐ Discuss the two foci of family health visits: education and health promotion **Environmental health and safety** By the end of the class students will be able to: ☐ Apply the ecological perspective to human and environmental relationships. ☐ Discuss concepts of prevention and upstream approaches to health impact and environmental health. ☐ Discuss how the core functions of public health can be applied to environmental health ☐ 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	**Rector Chapter 17,** **CCR1491(4)(L)** Emergency preparedness and response		

Commented [n15]: Lecture and discussion about environmental influences affecting human health and disease.

	☐ Know which disciplines work most closely with nurses in environmental health. ☐ Describe legislative and regulatory policies that have influenced the effect of the environment on health and disease patterns. **Disaster Preparedness** By the end of the class students will be able to: ☐ Describe the characteristics of disasters, including their causation, scope, and intensity. ☐ Discuss three factors contributing to a community's potential for experiencing a disaster. ☐ 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.	**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**		

Commented [CV16]: 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 [CV17]: Student continue working on their community needs assessment.

7 02/21	**Holiday**			
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. ☐ 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 nursing decision-making. ☐ Analyze codes of ethics for nursing and for public health.	**Ch. 4,** **The point:** Evidenced-based practice and Ethics in community health nursing and other modules **Addresses CCR1491(4)€** Research methodology and statistics	**Class discussion focus:** Ethical and cultural influence in public health nursing	**Faith-Based Paper Due Friday 03/03 by11:59 pm**

Commented [CV20]: Faith-based paper

Commented [n18]: 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.

☐ 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** 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. ☐ Identify five characteristics shared by all cultures. ☐ Conduct a cultural assessment. ☐ Apply principles of transcultural nursing in	**Ch.5** **Addresses CCR1491(4)(D)** Multicultural nursing concepts **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**	**Cultural competency training online** **Work in pairs:** Conduct a cultural assessment of a person from a cultural group other than yours.	

Commented [n19]: 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?

| 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.

☐ Describe three types of health disparities.

☐ Examine ways in which public policies affect vulnerable populations and can reduce health disparities in these groups. | 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**-

Addresses BPC2818(3) Prevention of abuse and neglect of children, elders, and spouses

Addresses BPC2818(3) Prevention of abuse and neglect of children, elders, and spouse-**1hr**

Addresses CCR1491(4)(J) | **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

Class discussion: Social and Community Factors influencing violence | |

(Above first row continued)

| | community health nursing practice

☐ Develop culturally competent nursing interventions to promote positive health outcomes for clients. | | | |

Commented [CV21]: 1.Lecture and class discussion supports; identify theological motivations for service; the needs of the population being served; the effects and affects resulting from those needs; and the causes of those needs, such as involuntary circumstances, individual choices and structural injustices;

Commented [CV22]:

☐ Examine the individual and social factors that contribute to vulnerability. ☐ Describe strategies that nurses can use to improve the health status, decrease health disparities of vulnerable populations and promote vulnerable populations empowerment. ☐ Identify two strategies to solicit and evaluate input from vulnerable populations when planning health care programs and services. **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. ☐ Discuss community risk factors and protective factors related to violence.	Family violence, e.g., child, adult, domestic, elder abuse, etc., prevention, detection, **intervention, treatment**, and California reporting requirements-**2hr** **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**	**Lippincott simulation** and assignment Virtual experience and real world experience	

Commented [CV23]: Lecture and class discussion on strategies nurses can use to improve the health status and decrease health disparities of vulnerable populations.

	☐ 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; ☐ 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**			

Spring Break 03/13 to 03/17				
11 03/21	**Behavior Change, 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. ☐ Develop teaching plans focusing on primary,	**Chapter 11**, Addresses CCR1491(4)© Health promotion and disease prevention in children-1hr Addresses CCR1491(4)(F) Health teaching concepts and strategies	**QUIZ 3**	

	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:	**Chapter 19, 20,** **Addresses BPC2818(4)** Outreach screening, case management, resource		

☐ 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 (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.	coordination and assessment, and delivery and evaluation of care for children and families- **1hr** **CCR1491(4)(K)** Case management/care coordination **QSEN:1, 2, 3, 4, 5, 6** **Bacc. Essentials: II, III, IV, V, VI, VII, VIII,**		

	☐ 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.	**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 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.	**Chapter 21**	

☐ 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.			
14 04/11	**VULNERABLE POPULATIONS Working with the homeless** By the end of the class students will be able to: ☐ Define the concept of homelessness. ☐ 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.	**Chapter 26, The point**	**QUIZ 4 Assignment:** Homeless of SB initiative The migrant farmworker as a vulnerable population	

Commented [CV24]: 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.

Commented [CV25]: Lecture and class discussion supports students awareness and ethical understanding of vulnerable populations supporting' articulate how they have been affected by their experience (for example, changes in beliefs, attitudes or values) and how their experiences might inform their calling to discipleship, citizenship and future service

	☐ 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. ☐ 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.	**Chapter 27** **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**		

Commented [CV26]: Lecture and class discussion identifying health disparities common in rural areas secondary to acces to care supporting; articulate how they have been affected by their experience (for example, changes in beliefs, attitudes or values) and how their experiences might inform their calling to discipleship, citizenship and future service

	☐ 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			
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. ☐ Describe characteristics of healthy older adults.	**Chapter 22**	**ATI proctored exam**	**Virtual experience the point:** Home safety and the aging adult

Commented [CV27]: Lecture and class discussion supporting; articulate how they have been affected by their experience (for example, changes in beliefs, attitudes or values) and how their experiences might inform their calling to discipleship, citizenship and future service

	☐ Provide an example of primary, secondary, and tertiary health promotion and prevention practices in the older adult population. ☐ Identify four chronic conditions most commonly found in the older adult population. ☐ Describe various types of living arrangements and care options for older adults ☐ Describe the importance of integrating palliative care into aspects of care for older adults. **COMMUNITY/PUBLIC HEALTH SETTING** **Home health and hospice care** By the end of the class students will be able to: ☐ Describe reimbursement and payment models for home health care and hospice programs. ☐ Explain family caregiver burdens of providing home and hospice care.	**Chapter 30** **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**		

	☐ Describe essential characteristics of home health and hospice nursing practice. ☐ Identify unique challenges of home and hospice nurses. ☐ 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.			
16 04/25		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**	

NUR 290

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.

<u>**Community Assessment Project and Intervention**</u>
(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.

> **Commented [MOU28]:** 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.

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

3) 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.

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 Presentation

CATEGORY	Exceeds standards 90 to 100%	Meets standards 80 to 89%	Approaches standards 76 to 79%	Below standards 75% and below
Oral Presentation/ Delivery	Students are well prepared. Speaks clearly and at understandable pace; well-rehearsed; no use of filler words (umm, like, you guys), within time limits; maintains eye contact Team cooperation always smooth.	Students are fairly prepared. Speaks clearly and at understandable pace most of the time; could use more rehearsal; each filler work will be a deduction of 1point use of filler words (umm, like, you guys), within time limits; maintains eye contact Establish eye contact most of the time. Team cooperation most of the time smooth.	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	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.

	objectives, public health core functions & essentials, and intervention wheel			
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 on 75% of the 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 **all** 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.	Makes good use of font, color, graphics, etc. on all of the slides to enhance the presentation.	Makes some use of font, color, graphics, etc. on all of the slides to enhance the presentation.	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?

2) 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 A general description of the disaster event is provided (dates, location, damages, number death…)	20	
Impact of the disaster: The impact of the disaster on the community from a public health standpoint is discussed (short and long term) o Public health risks o Cost of damage/response o Level of response	25	
Analysis: disaster response is discussed	25	

o Level of preparedness is discussed (county, state, federal; community) o Community response is discussed o Lessons learned are addressed		
The different roles of nurses during the related disaster response are identified and discussed	20	
Presentation and Format Presentation: Presentation is creative and interactive Presenters are knowledgeable: cover topic with additional information from slide notes 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	10	
Total	100	

Clinical syllabus

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

Clinical objectives:

1) Apply evidence-based, compassionate care to communities and populations regionally, across the state, nation, and globe.

2) 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)

5) 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.

Commented [n29]: Supports objectives for Serving Society; Enacting Justice

7) 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</u> <u>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:

- 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 self-care 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)
Group Contract and at-risk population selection (*50 Pts*)
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.

1. 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

   b. Results of the windshield survey of a geographic community in which the population lives.

   c. 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)

1. 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)
1. 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

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	
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

Clinical Faculty Name_____

Clinical Faculty Signature _____Date _____