

**HUMBOLDT STATE UNIVERSITY**

**Department of Nursing**



**NURSING IN THE COMMUNITY**

**Nursing 462**

Fall Semester 2001  
Lecture/Clinical

*Michelle Kelly and Marshelle Thobaben*

## TABLE OF CONTENTS

<i>Content</i>	<i>Page</i>
Table of Contents.....	2
<b>Course Overview</b> .....	4
Current Community Health Issues Presentation Guidelines.....	10
Community Health Assessment Assignment.....	11
Assessment of Your Community Agency Placement.....	13
<b>Community Health Nursing Lecture Schedule</b> .....	14
Dates for Community Health Nursing Lectures.....	15
Lecture Objectives.....	16
Orientation, Home Visiting Principles, Personal Safety, Infection Control, Ethical Issues.....	17
History of Community Health Nursing, Public Health Nursing, Healthy People/ Communities 2010.....	24
Health Care Services in the Home/Informal Caregiving.....	25
U.S. Health Care Policy and Entitlement Programs.....	26
Case Management Programs/Rural Health Care.....	27
Epidemiological Applications in CHN Role/Communicable Diseases.....	28
Occupational Health/Workplace/Violence.....	29
Environmental Influences on Community Health/Vulnerable Groups.....	30
Community Emergency Preparedness.....	31
Global Health.....	32

Ch Nurses in Specialized Community Roles/Future Trends in CHN.....	33
<b>Clinical Information</b> .....	34
Clinical Conference Schedule & Assignments.....	35
Clinical Assignments Due Dates.....	36
Holistic Health Presentation Guidelines. ....	37
Clinical Conference Case Presentation.....	38
Clinical Record.....	39
Clinical Activity Sheet.....	40
Clinical Goals.....	41
Student Self-Evaluation of Clinical Performance.....	42
Faculty Evaluation of Student .....	44
Clinical Placement Thank You Letter.....	46
<b>Agency Information</b> .....	47
Memorandum of Understanding (MOU).....	48
Explanation of Course.....	52
Course Overview.....	53
Agency Evaluation of Students. ....	59

# NURSING 462: NURSING IN THE COMMUNITY

## COURSE OVERVIEW

<b>COURSE TITLE:</b>	Nursing 462 – Nursing In The Community
<b>COURSE CREDIT:</b>	7 units (3 hours lecture, 16 hours lab per week)
<b>COURSE PLACEMENT:</b>	Senior Year
<b>COURSE PREREQUISITES:</b>	N362, 364,350;(N352, N356 R.N.s); Statistics 106
<b>FACULTY:</b>	Michelle Kelly, 826-5143, <a href="mailto:mdk4@humboldt.edu">mdk4@humboldt.edu</a> , GH 125F Marshelle Thobaben, 862-3634, <a href="mailto:mt1@humboldt.edu">mt1@humboldt.edu</a> , GH 125C

## CATALOG DESCRIPTION

Emphasis is on employing the nursing process utilizing modeling and role-modeling and the appropriate level of prevention in the community focusing on individuals, families, groups and communities.

## COURSE OBJECTIVES

- 1.1 Utilize theoretical and empirical knowledge from previous nursing courses, support courses and public health science to gain an understanding of individuals, families, groups and communities.
- 1.2 Develop an understanding of epidemiologic principles, which have implications for the health of a community.
- 2.1 Utilize Modeling and Role-Modeling, nursing process, and the appropriate level of prevention in the community focusing on individuals, families, groups and communities.
- 3.1 Analyze and utilize appropriate communication processes in coordination with other care providers in the health care of clients in the community.
- 4.1 Incorporate those nursing practices, which demonstrate respect for ethnic identity, and socio-cultural practices of clients in the community.
- 5.1 Provide and evaluate nursing care given to clients in the community according to legal, ethical, and professional standards of quality care.
- 5.2 Assume responsibility and accountability for providing quality care with indirect supervision in a community setting.

- 5.3 Assist consumers to exercise their rights to select, participate in and evaluate health care.
- 6.1 Examine the health care delivery system in the U.S. and its impact on community health nursing and identify appropriate nursing actions, reflective of legal, political, geographic, economic, ethical and social influence.
- 6.2 Examine the needs of a rural health care delivery system and function as a liaison between the client and the health care services available in a rural community.
- 6.3 Discuss factors influencing the health of persons in developed and developing countries.
- 6.4 Recognize the socio-political and economic issues in the community, which affect the client's health and health care and serve as an advocate when appropriate.
- 7.1 Adapt, initiate, and evaluate teaching strategies, which are appropriate for peers, and individual clients and groups in the community.
- 8.1 Utilize leadership behaviors in collaborating with health team members in the community to identify a need for planned change, facilitate this change with a selected group of clients and analyze its effectiveness.
- 9.1 Apply research findings to community health nursing practice.
- 10.1 Collaborate with other health care providers and clients to plan, provide and evaluate nursing and health care.
- 10.2 Identify and perform professional nursing roles with clients in the community and analyze the implication of those roles.
- 11.1 Identify through self-evaluation an area in which further learning is needed and select appropriate learning activities in the community to meet identified learning needs.
- 11.2 Function autonomously seeking appropriate consultation while providing care to clients in the community.
- 12.1 Identify the actual and potential commitments and contributions of the community health nurse in society.

## **TEXTS**

### Required

Chinn, James. Control of Communicable Diseases Manual (17<sup>th</sup> ed.) 2000. (APHA)

Clark, Mary Jo, Nursing in the Community: Dimensions of Community Health Nursing (3<sup>rd</sup> ed.) 1999. Stamford, Connecticut: Appleton & Lange.

Erickson, H., Tomlin, E., & Swain, M., (1983). Modeling and Role-Modeling: A theory and paradigm for nursing. Lexington, S.C.: Pine Press.

Nursing 462 Course Packet

Level I & II Textbooks for references

Recommended

Marelli, TM. (1998) Handbook of Home Health Standards and Documentation Guidelines for Reimbursement (3rd ed) St. Louis, Missouri: Mosby-Yearbook, Inc  
Stanhope, M., & Knollmueller, R. (2001) Handbook of Public and Community Nursing Practice (2nd ed) St.Louis, Missouri: Mosby-Yearbook, Inc.

**TEACHING METHODS**

Lecture/discussion, case presentations, applications, vignettes, small group work, clinical conferences, and reflective journals.

**COURSE EVALUATION**

Methods of evaluation include assigned learning experiences, written examinations, and group and individual presentations. The clinical laboratory will include agency and faculty evaluation of student performance in the community settings, students’ self-evaluation, regular student-faculty meetings, weekly journal article reviews, and participation in clinical conferences.

Students with documented learning disabilities requiring the use of the testing center need to make arrangements with the Testing Center to be able to take the test at the same time it is given in the classroom. The faculty need to be notified in writing a head of time to arrange to have the test available in the testing center.

**COMMUNICATION**

Faculty will be communicating course information and updates via e-mail and during class. It is the student’s responsibility to provide the faculty with a current phone numbers and e-mail address at the beginning of the semester. Each faculty will explain their preference for communication with their clinical students.

**LECTURE REQUIREMENTS**

***I. Examinations***

- Exam 1, quizzes and other graded in class activities.....25%
- Exam 2, quizzes and other graded in class activities.....30%
- Exam 3, quizzes and other graded in class activities.....25%

\*\*\* Note: If students have concerns about exam questions, please put these concerns in writing to the appropriate faculty member.

***II. Reading Quizzes***

Each lecture period will begin with a brief quiz on the assigned reading for that week. Please be on time for class. Quizzes may *not* be made up. Points on quizzes will be added to the immediate test. These points effectively become part of the test. Therefore, doing poorly on the weekly quizzes or missing a few may impact your test grade. There may also be in-class exercises that are graded.

***III. Community Health Issues Presentation*** .....10%

***IV. Assessment of Agency Placement***.....05%

***V. Community Health Assessment Model***..... 05%

\*\*\* Unless otherwise specified, all papers should be typed in APA format. Failure to do so may result in a grade of "F" for that assignment. Guidelines for citing sources from the Internet can be found at: <http://www.apastyle.org/elecref.html>

### **V. Course Midsemester Evaluation**

What do you like about the course so far? What in the course is not working for you? If you were the instructor, what would you do at this point to make the course work better? What can you do to make the course work better for yourself for the remainder of the semester?

## **CLINICAL REQUIREMENTS**

### **Agency Placements**

Students will be placed in a variety of community health nursing placements. Many of these will expose you to a broader, population-focused role. The faculty recognizes that the student's placement may not fit his/her personal preferences. If students believe they are facing a difficult situation in their placements, they are to discuss the situation immediately with their clinical faculty. The clinical faculty will help the student identify strategies for dealing with the problem. In rare instances, students have been moved to other placements after consultation with the clinical faculty.

**Students are expected to maintain the highest standard of professionalism in their communication with faculty and agency personnel.** *Failure to act or communicate in a professional manner while in the community health nursing course will result in an automatic failure in the course.* Students are strongly encouraged to discuss this requirement with their faculty to ensure that there is no confusion about what constitutes unprofessional behavior.

### **Time Requirements**

The student is expected to complete 16 hours each week for a semester total of 180 hours. The maximum clinical time permitted each week is 2 eight hours days unless otherwise approved by your faculty. ***If students are sick, they must notify their clinical instructor and agency preceptor by 8 am of their clinical day. All clinical absences are to be made up.***

### **Clinical Appearance and Behavior**

Each student is expected to comply with the dress code of the Department of Nursing (refer to your Student Handbook) even if your agency's code is more relaxed. If you have questions about the dress code and faculty's expectations, please clarify these points early in the semester. All students are required to wear their HSU student photo ID in the clinical setting. Failure to comply with dress code and standards may result in probation or possible failure.

### **Clinical Equipment**

For those students placed in home health agencies, it is strongly recommended that you have a functioning blood pressure cuff, stethoscope and bandage scissors.

### **Confidentiality**

Because this is a small community, students are reminded of the need to maintain the highest standards of confidentiality. Not only should students refrain from discussing

client information indiscreetly, they are not to discuss their concerns about faculty with anyone other than the specific clinical faculty member. A break in confidentiality can result in automatic failure of the course.

### **Travel Time and Insurance**

Students are required to have reliable transportation. Clinical placements are arranged throughout Humboldt and Del Norte Counties.

Students' travel time to agency placements does **not** count as clinical hours. Each student will be asked to verify that he/she has current automobile liability insurance.

Occasionally students may be placed in agencies requiring driving time longer than an hour and a half. In these cases, the clinical faculty may consider travel time as part of the clinical time requirements.

### **Clinical Evaluation**

Students will be evaluated by the faculty and agency mentor. Students are responsible for a narrative self-evaluation at midterm and at the end of the semester.

### **Clinical Supervision**

Students are expected to meet with their clinical faculty to review progress. *A written clinical log documenting their time and experiences is required as part of the student journal.* The faculty will make at least *one* home visit with each student.

### **Weekly Clinical Journal**

Your reflection journal is an integral part of your clinical experience. It is submitted to your clinical instructor weekly on the day of the scheduled clinical conference. It may also be submitted via e-mail. When you discuss your clients, do not use their names, since e-mail is not a confidential data transmission method. If you use email for your journal, copies of your charting are to be turned in regularly as required by your clinical instructor. Your agencies are aware of this requirement and you may copy your charting there. Please whiteout your clients/families' names and addresses.

There are 4 components of the journal:

1. A **log** which documents your time;  
Weekly record of your clinical hours and the type of experiences.
2. **Types of experiences, and a reflective analysis** of them;  
To encourage the ongoing process of self-discovery and critical reflection, consider these questions and record your answers in your journal:  
Reflection
  - What? (What have you learned from this week's experiences? How did you feel before, during, and after your visits to families and agencies? What is your analysis of interdisciplinary and/or interagency meetings in terms of issues being considered, decision-making process, conflict, team functioning.)
  - So What? (How will you function differently as a result of my learning? If so, how?)
  - Now What? (How will you use what you have learned? What did you learn that changed your assumptions or strengthened your beliefs and values?)

### Client Information

- Biophysical, psychosocial, cognitive and social information
- Health promotion activities
- Self-care abilities
- Internal and external stressors
- Internal and external resources

### 3. **Journal articles** pertinent to your community placement.

#### Journal Articles

Each week write a brief summary of *two* articles you have read that are directly related to your clinical experience or to general issues in community health.

Please cite the article sources. Articles from a journal or chapter of a book are both acceptable. Three of the articles are to be from pertinent community health research journals. Please be sure to discuss how the research presented could be applicable to clinical practice. **Fourteen articles** are required for the semester. You may not use chapters in your texts for these required readings.

### 4. **Clinical goals.**

Individualized clinical goals to be identified by the third week of the semester, and progress noted at midterm and final.

## **PASSING NURSING 462**

To pass Nursing 462 the student must satisfactorily complete all required course work. A passing grade of "C" or (2.0) must be obtained in the course by passing both the Theory emphasis with a grade of "C" (2.0) and the Clinical emphasis with a grade of "Pass". The following grade scale will be used:

93-100 = A  
90-92 = A-  
87-89 = B+  
83-86 = B  
80-82 = B-  
77-79 = C+  
73-76 = C Passing  
-----  
70-72 = C-  
60-69 = D

Please refer to the Department of Nursing's Student Handbook, HSU Catalog, Title 5 of the California State Administrative Code, and Laws Relating to Nursing with Rules and Regulations, items 1761 and 2762. Failure to comply with these standards will result in serious consequences.

**CURRENT COMMUNITY HEALTH ISSUES PRESENTATION GUIDELINES**  
**10 % of Course Grade**

**Course Objectives:**

1.2, 2.1, 6.1, 6.4, 9.1,10.2

**Assignment Objectives:**

Upon completion of this assignment, the student will have:

1. Researched data from a variety of library and online resources regarding a specific current community health problem.
  
2. Developed a 10-minute oral presentation for the class using principles of health education and teaching/learning (refer to Clark, Chapter 9).

**Guidelines:**

Assume that you will be developing a presentation for a group of health care professionals. The student will select a current issue that significantly affects the health of a population aggregate in the United States. Topics are to be cleared with faculty. Selected topics may include biochemical weapons, current epidemiology and community health nursing interventions with emerging diseases, ethical considerations of managed care, vulnerable population aggregates and nursing implications, and innovative public health programs. Information about this community health problem should include the relevant demographics, scope of the problem, current political, legal and ethical issues regarding the issue, the resources of the health care system currently devoted to this problem, and a discussion of professional nursing roles and interventions relevant to the community health nurse.

Although the presentation is oral, please turn in a detailed written outline, including the citations of electronic and paper references used.

Students will record their chosen topic on the N 462 bulletin board; they can proceed with preparing their presentation after having faculty approval.

**Grading of the Presentation:**

Assessment of the problem .....	5 %
Analysis of current resolutions of problem .....	3 %
Discussion of community health nurse role r/t problem.....	2 %

## **Community Health Assessment Assignment** (5% of course grade)

### **Instructions:**

For this assignment the class will be **divided into groups** of 3 to 4 students.

Each of the groups will be **assigned a specific category** of the Community Health Assessment Model below.

Your group will **research / assess for the information** in the assigned category.

Each group needs to **prepare a detailed outline** to faculty.

All the groups will then **present your findings** in class.

In the presentation, show your classmates **how your group accessed the community health data**.

### **Sources of Data:**

Informant interviews

Windshield survey

Survey of Community members

Focus Groups

Existing surveys

Healthy People/ Communities 2010 documents

Census Data

Demographic data

Morbidity and mortality data from county, state and federal (CDC)

Articles and publications

### **Faculty Grading Criteria:**

Information Gathered

Was the key/ essential information presented adequately?

Access of resources

Did the group clearly explain how to obtain sources used for the community data to the class?

Presentation Format

Did the group present the content well? Was the flow of information well paced and effective? Was the presentation creative?

## Community Health Assessment Model

### Community Health Assessment Guide Categories

#### A. Community

##### 1. Place

- a. Geopolitical boundaries of community
- b. Local or folkname for community
- c. Size in square miles/areas/blocks/census tracks
- d. Transportation avenues
- e. Physical environment

##### 2. People

- a. Number and density of population
- b. Demographic structure of populations
- c. Informal groups
- d. Formal groups

##### 3. Function

- a. Production-distribution-consumption of goods and services
- b. Socialization of new members
- c. Maintenance of social control
- d. Adapting to ongoing and unexpected change
- e. Provision of mutual aid

#### B. Community Health

##### 1. Status

- a. Vital statistics
- b. Disease incidence & prevalence for leading causes of morbidity and mortality
- c. Health Risk Profiles
- d. Functional ability levels

##### 2. Structure

- a. Health Facilities
- b. Health-Related planning groups
- c. Health manpower
- d. Health resource utilization patterns

##### 3. Process

- a. Commitment
- b. Self-other awareness and clarity
- c. Articulateness
- e. Effective communication
- f. Conflict containment and accommodation
- g. Participation
- h. Management of relations with larger society
- i. Machinery for facilitating participant interaction and decision making

From Stanhope, M., & Knollmueller, R. (2001) Handbook of Public and Community Nursing Practice (2nd ed) St.Louis, Missouri: Mosby-Yearbook, Inc., p 76-77.

## Assessment of Your Community Agency Placement

### Course Objectives:

3.1, 4.1, 5.1, 6.2, 6.4, 10.1, 10.2, 12.1

### Community Agency Analysis Objectives:

Upon completion of this assignment, the student will be able to:

1. Briefly describe the community health agency (all the programs offered by agency) you are assigned to in terms of: the type of organization, its philosophy or mission statement, purpose, services it offers and funding sources. Give specific examples of how the agency strives to maintain and/or increase its funding.
2. Discuss the effectiveness of the agency in meeting its goals and the needs of its target population by analyzing data from staff, clients (client satisfaction surveys), reports to funding sources, community perception and internal quality assurance programs.
3. Discuss the community health nurse's role in regard to factors influencing role expectation and how it relates to the formal and informal structure of the community health agency. Describe the community health nursing student's role and responsibilities in the agency, involvement with the interdisciplinary team, factors influencing it including her/his own strengths and limitations), and how s(he) would or have resolved conflicts or suggested policy changes. Discuss the CHN's perception of his or her contribution to the community.

**COMMUNITY HEALTH NURSING LECTURE SCHEDULE**

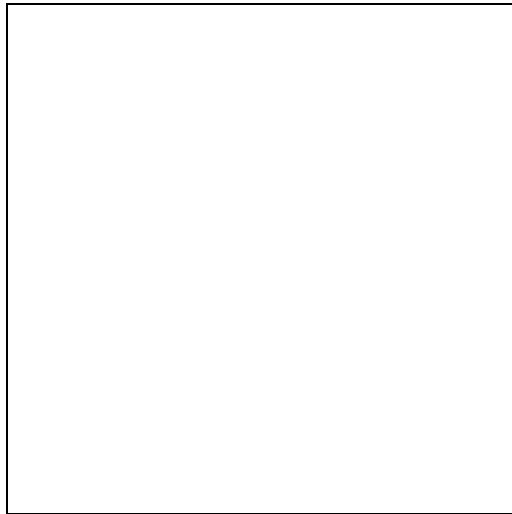


## **DATES FOR COMMUNITY HEALTH NURSING LECTURES**

8/28	Orientation to Nursing in the Community Course, Home Visiting Principles, Personal Safety, Infection Control, Ethical Issues
9/4	History of Community Health Nursing, Public Health Nursing Principles & Practice, Healthy People / Communities 2010
9/11	Health Care Services in the Home Informal Caregiving
9/18	Test # 1
9/25	Case Management Rural Health Care
10/2	U.S. Health Care Policy and Entitlement Programs
10/9	Epidemiological Applications, Sources of Health Data Communicable Diseases
10/16	Occupational Health Workplace Violence
10/23	Test # 2
10/30	Environmental Health Vulnerable Groups
11/6	Presentations on Current C.H. Issues
11/13	Presentations on Current C.H. Issues
11/19-23	Thanksgiving Recess
11/27	Community Emergency Preparedness Global Health
12/4	Community Assessment Presentations
12/11	Test # 3 Panel of Nurses in Specialized Community Roles (chapters related to specialized roles included in Test #3)

\*\*\* Final Exam Period: December 17-21 ***Group Community Agency Placement Presentations***

## **LECTURE OBJECTIVES**



**Orientation to Nursing in the Community Course, Home Visiting Principles,  
Personal Safety, Infection Control, Ethical Issues**

**Course Objectives:**

4.5, 5.2, 10.2

**Lecture Objectives:**

After completion of the required reading, homework assignments and participation in class, the student will be able to:

1. Understand the phases and activities of a typical home visit.
2. Discuss the process of contracting with clients on home visits.
3. Discuss the concept of empowerment of clients.

**Clinical Objectives:**

1. Utilize community health nursing standards in determining clinical practice strategies, goals and interventions.
2. Conduct effective client-centered home visits, being aware of one's own personal safety.
3. Apply the ethical principles in the practice of community health nursing.

**Teaching Methods:**

Lecture/discussion, video

**Required Readings:**

Clark, Chapter 10: pgs 188-192, 196-207, Chapter 15: pgs 313-315

## Phases and Activities of a Home Visit

Phase	Activity
I. Initiation phase	Clarify source of referral for visit Clarify purpose for home visit Share information on reason and purpose of home visit with family
II. Previsit phase	Initiate contact with family Establish shared perception of purpose with family Determine family's willingness for home visit Schedule home visit Review referral and family record
III. In-home phase	Introduction of self and professional identity Social interaction to establish rapport Establish nurse-client relationship Implement nursing process
IV. Termination phase	Review visit with family Plan for future visits
V. Postvisit phase	Record visit Plan for next visit

From Stanhope, M., & Lancaster J. (1992) Community Health Nursing (3rd ed) St.Louis, Missouri: Mosby-Yearbook, Inc.

## **DO'S AND DON'TS FOR A SUCCESSFUL COMMUNITY HOME VISIT**

Provided by: Mary E. Scott, R.N.

**DON'T** be late for the home visit or make a “surprise” visit.

**DO** be on time! Make sure you have accurate directions and call in advance to schedule the visit. If you find yourself behind schedule (and it can happen!), call the client and give them your estimated time of arrival.

**DON'T** wear fancy jewelry or your “Sunday best.”

**DO** wear clean, comfortable, machine washable clothes and minimal jewelry. The idea is to look professional and blend into any neighborhood.

**DON'T** park on an isolated or poorly lighted street.

**DO** park as close to the client's home as possible and allow yourself access for a quick exit should the need arise. Ideally, keep your car within view from inside the client's home. Lock your car!

**DON'T** leave your purse or nursing bag within view in your car.

**DO** lock your purse and any nursing supplies you won't be using in the trunk of your car. If you don't have a trunk, take only your driver's license and keep a small amount of emergency cash on your person.

**DO** make sure your agency is aware of your schedule at all times! Call if you have a change in plans.

**DON'T** walk directly into a client's home.

**DO** knock and wait to be invited in. Remember, you are a guest in their home.

**DON'T** stay in the environment if you don't feel safe. Leave immediately and call the client to reschedule your appointment. If you observe a crime in action, leave the scene, call the police and your agency. If problems arise during the home visit, excuse yourself and leave as soon as possible.

**DON'T** make judgments or negative comments about the appearance of the client's home.

**DO** keep your facial expression friendly and non-judgmental. Ask the client if they need help in “anyway.” Treat the client and family with respect.

**DON'T** position yourself with your back to doors.

**DO** try to be aware of anyone entering or exiting the home. Position yourself with a clear view of entrances and exits.

**DON'T** tell the client what you want them to do.

**DO** ask the client how they are feeling and ask if they have any concerns or questions.

**DON'T** criticize the client or the caregiver for not following your instructions or the health care plan.

**DO** discuss your observations. Compliment areas of care preformed successfully and reinforce your teaching. Try to discover why procedures were not preformed. Remember, everyone has their own way of “doin' things.” As long as the principles are maintained, the procedures “don't matter.”

**DO** listen to the client. They may have tips that will help you!

**DON'T** use medical jargon when teaching or explaining procedures.

**DO** speak slowly and clearly. Make sure to reinforce your teaching with handouts or pictures if the client is unable to read. Ask if the client has any questions. Watch their facial expressions for signs of concern or confusion.

**DON'T** rush your visit even if you are behind schedule.

**DON'T** discuss sensitive topics, i.e., religion, politics, or discuss your private life.

**DO** ensure time for client concerns and some conversation. You can learn a lot through small talk. Encourage them to tell you about themselves.

**DO** thank the client and family for the visit and confirm your next appointment time.

**DO** follow through with your promises.

**DO** keep the client apprised of health care plan changes.

**DO** enjoy yourself! Community nursing is rewarding!

**EXTRA TIP:** Keep a box of “Wet Ones” in your car for those times when water isn’t available.

## **Ethics Community Health Nursing Application Exercise**

What do **you** believe?

1. How should health care resources be allocated among different groups?
2. Do you think health care funds should be used primarily for preventive health care or curative care?
3. Should all taxpayers have access to health services funded by taxes? If so, why do you think so? If not, who should be eligible for those services?
4. Should health care providers assist terminally ill clients to end their lives if they request help?
5. Should the names of clients testing positive for HIV be reported to the state?
6. Why role should the state play in identifying and persecuting pregnant women testing positive for narcotics

### **Ethical Decision Making**

1. Identify the problem (Determination and acknowledgment of the conflict)
2. Identify the ethical issues (Clarification of the nature of the conflict (i.e., ethics problem or ethics dilemma)
3. Define personal and professional moral positions and legal positions if applicable
4. Identify value conflicts
5. Identify all those involved in making the decision, and determine who should make the decision
6. Identify each of the actions possible, and explore alternatives
7. Selection and implementation of a course of action
8. Evaluate results

Bioethics guides health care professionals. It uses principles for framing ethical issues in any case. There are two approaches in bioethics. Deontology is concerned with duty and the use of principles, especially beneficence, non-maleficence, and justice, to deal with problems. Teleology or utilitarianism is concerned with consequences and uses beneficence in seeking optimal outcomes.

Autonomy - (Advocacy) - respect for the person, individual dignity, self-determination, and rights.

Inward autonomy: has the faculty and ability to make choices

Outward autonomy: choices are not limited or imposed by others

- Will a particular course of action lead to anyone being used as a means to an end without regard for his/her individual rights?  
Based on the individual's right of self-determination.
- Implies a partnership - but respects each person's ability and right to make decisions even when those decisions seem to be not in the person's best interest.

Nonmaleficence - do no harm or minimizing harm ("primum non nocere"). Health care professionals must avoid causing harm and strive to protect clients from harm. It is an over-riding principle in health care - shared by both medicine and nursing  
Nightingale pledge: "...I will abstain from whatever is deleterious and mischievous, and will not take or knowingly administer any harmful drug..." (Craven & Hirnle, Chapt 16, pg. 256)

- Harm can be deliberate harm, risk of harm, and unintentional harm
- Intentional harm is unacceptable in nursing, but what about risk of harm? There may be risk of harm from an intervention that is intended to be helpful (e.g., pain med to relieve suffering, but could hasten death). How much risk is morally permissible?
- Requires practice be up to standards - not following standards could be harmful

Veracity - truth telling; always tell the truth; never lie or deceive (formerly was common **not** to tell people what their diagnosis or prognosis was).

- Now, do we sometimes give **too much** information?
- Deception can occur with beneficence and paternalism.
- *Deception can arise from the **principle of nonmaleficence***
- What if the truth could cause harm? Would cause anxiety and fear? Is it better to tell a lie in order to relieve anxiety?
- The resultant loss of trust in the nurse generally outweighs benefits derived from lying.
- Informed consent arises from the principles of autonomy and veracity

Beneficence - do good. Client's well-being is sole importance; doing the greatest good and balancing the risks and benefits. Health care professionals have an obligation to implement actions beneficial to the clients. Doing good must be balanced with risk of harm, especially with the advanced technology in today's health care.

A type of beneficence is paternalism

- Do what **you** know is best - even if the client doesn't understand; Even if it means restricting liberty or autonomy.
- This is where there are some major ethical differences between medicine and nursing.

Justice - Fairness, equitable use of resources and equal access to care. Individual need justifies who gets what and how much. Individuals or groups are similarly treated. People should have what they deserve or can legitimately claim.

- What is fair?
- Balance of resources:
  - equal shares go to all recipients
  - those in greatest need get what they need

Fidelity – Faithfulness to the agreements and responsibilities undertaken; keeping your promises; essence of trust

We have responsibilities to clients, employers, government, society, our profession, ourselves.

- Which contracts/agreements/responsibilities take precedence?
  - Contract with the employer?
  - Contract with the client?

- Contract with the professional code of ethics?
- May be affected by circumstances at any particular time

Adapted from: Dr Betty Jensen lecture notes, and Michelle Kelly and Marshelle Thobaben's notes. 8/2001

**History of Community Health Nursing,  
Public Health Nursing Principles & Practice,  
Healthy People / Communities 2010**

**Course Objectives:**

1.1, 2.1, 5.1, 5.3, 6.1, 6.2, 6.4, 10.1,12.1

**Lecture Objectives:**

After completion of the required reading, homework assignments and participation in class, the student will be able to:

1. Describe the critical attributes that define a community.
2. Define community health and goals of community health practice.
3. Identify the core public health functions of US and Canada.
4. List significant historical events in the development of community health nursing.
5. Summarize the ANA Standards for Community Health Nursing Practice.
6. Describe the major client-oriented roles and functions performed by community health nurses.
7. Describe primary, secondary and tertiary levels of prevention.

Not in text – covered in lecture

8. Discuss essential Public Health Services and responsibilities of the local, state and national public health systems.
9. Describe the specialization of PH nursing and the 8 core competencies for PHN's in California.
10. Formulate groups to start working on Community Health Assessment assignment.
11. Describe the role of primary health care in the Alma Ata document.

**Clinical Objective:**

1. Utilize knowledge of public health nursing principles when providing care to individuals, families and community aggregates.

**Teaching Methods:**

Lecture/discussion

**Required Readings:**

Clark: Chapter 1, Chapter 2 pages 14-20, 25-26, Chapter 3 page 32 Chapter 4 pages 55-65, Chapter 5, page 74

## **Health Care Services in the Home Informal Caregiving**

### **Course Objectives:**

2.1, 3.1, 4.1, 5.1, 5.2, 5.3, 6.1, 6.2, 8.1,10.1, 10.2, 11.2, 12.1

### **Class Objectives:**

After completion of the required reading and participation in class, the students will be able to:

1. Describe the types home health agencies.
2. Identify the various types of families and their characteristic features
3. Explain the considerations to be addressed in assessing the dimensions of health in the family.
- 4.

Not in text – covered in lecture

5. Discuss the ANA Standards of Home Health Nursing Practice in home health care
6. Identify the roles and functions of interdisciplinary team members in the home health agencies.
7. Analyze the reimbursement mechanisms and issues relative to home health care.
8. Discuss quality assurance programs in relation to the home health settings.

### **Informal Caregiving**

9. Cite statistics and challenges of informal caregivers.
10. Identify the four stages of caregiving that many families experience.

### **Clinical Objectives:**

1. Use the roles of clinician, teacher, advocate and leader with clients in home settings incorporating principles of modeling and role-modeling.
2. Evaluate the quality of nursing care according to the ANA home health standards of care.

### **Teaching Methods:**

Lecture/discussion, guest speaker

### **Required Readings:**

Clark, Chapters 10, p. 193-195, 209; Chapter18, p. 392-396, (types and characteristics) 406-408 (assessment tips) (review from Level II family assessment/intervention notes)

## **U.S. Health Care Policy and Entitlement Programs**

### **Course Objectives:**

1,6.1, 6.4

### **Lecture Objectives:**

After completion of the required reading, homework assignments and participation in class, the student will be able to:

1. Discuss the local, state and national levels of health care delivery systems.
2. Describe the role of the Department of Health and Human Services (DHHS) and the functions of some of the major branches.
3. Compare US health system to a health care system in another country.
4. Identify major factors influencing national health care spending.
5. Identify three forms of publicly funded health insurance.
6. Identify at least four requisites for an effective health care reform proposal.
7. Describe three mechanisms for reimbursing health care providers.

Not in text- to be covered in lecture

8. Understand eligibility and benefits of major federal and state entitlement programs.

### **Clinical Objective:**

1. Function as a knowledgeable, resource person on health care services for clients.

### **Teaching Methods:**

Lecture/discussion

### **Required Readings:**

Clark, Chapter 3, pages 29-40, Chapter 14, pages 280-301

On reserve in library – Race, Class and Gender in the United States, Chapter 10

Welfare: Exploding the Stereotypes, pgs 242-248.

## **Case Management Rural Health Care**

### **Course Objectives:**

2.1, 3.1, 5.1, 6.1, 6.2, 6.4, 8.1, 10.1, 10.2

### **Class Objectives:**

After completion of the required readings and participation in class, students will be able to:

Case Management  
from Chapter 11

1. Define the terms associated with managed care and case management.
2. Identify five goals of case management.
3. Describe three characteristics of effective case management programs.
4. Identify at least five characteristics of effective case managers.
5. Discuss the standards of case management practice.
6. Describe legal issues related to case management.
7. Identify criteria for selecting clients in need of case management.
8. Assess the need for case management in terms of dimensions of health.
9. Discuss at least two considerations in developing a case management plan.
10. Identify at least three aspects of initiating a referral.

Rural Health

from Chapter 27

11. Describe three domains of the concept of rurality
12. Describe at least four barriers to effective health care in rural areas.
13. Identify two age groups at particular risk for health problems in rural settings.
14. Describe at least five physical dimensions concerns unique to rural settings.
15. Identify four major occupational and safety risk factors for rural populations.
16. Discuss two aspects of the impact of health policy on rural community health care.
17. Identify three aspects of primary prevention in rural settings.
18. Describe four approaches to secondary prevention in rural settings.

Not in text- to be covered in lecture

19. Identify alternatives available to the rural community in providing rural health care.
20. Discuss the various roles community health nurses play in rural communities.

### **Clinical Objective:**

1. Be able to understand the services provided for clients in case managed programs.
2. Be able to practice community health nursing in rural settings with an understanding of its unique characteristics.

### **Teaching Methods:**

Readings, lecturer/discussion/guest speakers

### **Required Readings:**

Clark, Chapter 11, 27

## **Epidemiological Applications in CHN Role & Communicable Diseases**

### **Course Objectives:**

1.1,1.2, 2.1, 3.1, 4.5, 5.2, 5.3, 6, 6.2, 6.3, 7.1, 8.1, 9.1, 10.1,10.2

### **Lecture Objectives:**

After completion of the required reading, homework assignment and participation in class, the student will be able to:

1. Define epidemiology and discuss the concept of causality.
2. Distinguish between morbidity, mortality, incidence and prevalence rates.
3. Relate the natural history of disease to levels of prevention.
4. Discuss the epidemiological triad and the web of causation models.
5. Discuss the types study designs used in epidemiology.
6. Understand the principles of communicable disease control.
7. Understand the current trends in HIV, hepatitis, STD's, TB, and influenza.

Not in text- in lecture

8. Describe the communicable disease reporting processes.

### **Clinical Objectives:**

1. Understand and utilize the correct reporting mechanisms and data interpretation for communicable diseases.
2. Be able to appropriately access health statistics resources in the library and health department to develop an accurate base for the assessment of an individual as well as community.
3. Be able to use the concepts of epidemiology to provide appropriate interventions in the community.
4. Implement interventions to control communicable disease in the community.

### **Teaching Methods:**

Lecture/discussion

### **Required Reading and Preparation:**

Clark, Chapters 8 pgs 144-158, Chapter 30

Benesons: Communicable Disease Control Manual.

## **Occupational Health Workplace Violence**

### **Course Objectives:**

1.1, 2.1, 3.1, 5.1, 5.3, 6.1, 6.2, 6.3, 12.1

### **Class Objectives:**

After completion of the required reading and participation in class, the student will be able to:

1. Summarize the purpose, intents, and mandates of the Occupational Health and Safety Act of 1970.
2. Describe the objectives and functions of the occupational health nurse.
3. Identify the ten leading work-related health problems in the United States.
4. Identify leading types of health and safety hazards encountered in work settings.
5. Describe four spears of social influence on health of employees.
6. Describe primary, secondary and tertiary prevention in the work setting.

from Chapter 34 Violence

1. Describe the theories of assaultive violence. (Chapter 34)

Not in text- in lecture

2. Define workplace violence.
3. Cite examples and statistics related to workplace violence.
4. Discuss risk factors associated with workplace violence.
5. Understand the OSHA General Duty Clause.
6. Develop a workplace Violence Prevention Program.

### **Clinical Objectives:**

1. Be able to conduct an Occupational Health History and Workplace Assessment.
2. Be able to design interventions that protect workers and promote a safe and healthful workplace.

### **Teaching Methods:**

Lecture/discussion

### **Required Reading and Preparation:**

Clark, Chapter 26, 34, p. 888-889

## **Environmental Influences on Community Health Vulnerable Groups in the Community**

### **Course Objectives:**

1.1, 5.3, 6.1, 6.2, 6.4

### **Class Objectives:**

After participation in class and completion of the required reading, the student will be able to:

3. Identify major health hazards arising from the environment.
4. Describe the impact of environmental pollutants on a communities' health status.
5. Identify resources for promoting environmental health.

Not in text – in lecture

6. Identify the role of the CHN in environmental health.
7. Identify selected federal legislation relevant to environmental hazards/health effects.
8. Describe the aspects of vulnerability within the community.
9. Discuss major health issues vulnerable populations face.
10. Identify the role of the CHN in working successfully with vulnerable populations.

### **Clinical Objectives:**

1. Correctly, identify environmental health hazards in the home and community.
2. Be able to access appropriate referral sources for local environmental health hazards.
3. Identify and work effectively with vulnerable groups with in the community.

### **Teaching Methods:**

Lecture/discussion/ guest speaker/ activity

### **Required Reading:**

Clark, Chapter 17.

## Community Emergency Preparedness and the Role of the CHN

### Course Objectives:

1.2, 2.1,3.1, 6.2, 8.1

### Class Objectives:

After completion of the required reading and participation in class, the student will be able to:

1. Define community disaster.
2. Describe four ways in which disaster events may vary.
3. Discuss six principles of community disaster preparedness.
4. Describe characteristics of a successful disaster plan.
5. Discuss the role of the CHN in community-based disaster preparedness.
6. Discuss areas for client education related to disaster preparedness.

Not in text- in lecture

7. Describe how to set up and manage an emergency triage system.
8. Discuss guidelines for the scope of nursing practice as it relates to disaster situations.
9. Discuss the major health concerns created by disasters.
10. Identify U.S. and U.N. organizations mandated with disaster preparedness and rescue.

### Clinical Objectives:

1. Be able to work with disaster preparedness groups at the community level.
2. Use leadership skills in working with disaster-affected communities.

### Teaching Methods:

Lecture/discussion/video/guest speaker

### Required Reading:

Clark, Chapter 29

## Global Health

### Course Objectives:

1.1, 1.2, 2.1, 4.1, 6.1, 7.2, 7.3, 7.4, 8.1, 9.1, 10.1, 10.2, 11.1, 12.1

### Class Objectives:

After completion of the required reading and participation in class, the student will be able to:

1. Describe the types of international health agencies.
2. Identify major areas of concern in international health.

Not in text – in lecture

3. Discuss essential factors influencing the health of international populations.
4. Define health according to World Health Organization (WHO).
5. Determine factors affecting global patterns of morbidity and mortality.
6. Discuss health risks to children in the developing world.
7. List the *Top 10 Facts for Life* health messages from UNICEF.
8. Describe strategies of child survival programs.
9. Explain the linkage between the role/status of women and health of their families.
10. Discuss the types of agencies that operate health programs in the third world.
11. Discuss nursing and the role of the nurses in the third world.

### Clinical Objectives:

1. Understand the needs of populations in the developing world with a focus on vulnerable groups
2. Be able to design appropriate prevention strategies for populations in the developing world.
3. Be able to advocate for vulnerable and/or disenfranchised populations in the third world.

### Teaching Methods:

Lecture/discussion.

### Required Reading and Preparation:

Clark, Chapter 3 pages 41-48.

Global Health Reading packet - on reserve in the library.

Review any current newspaper, radio, or television news for information on international health events. Be prepared to discuss your findings with the class.

## **Community Nursing in Specialized Settings and Future Trends in CHN Practice**

### **Course Objectives:**

5.1, 6.2, 10.1, 12.1

### **Class Objectives:**

After completion of the required readings and participation in class the student will be able to:

1. Compare and contrast roles of CHNs In specialized settings.
2. Describe future trends of CHN practice.

### **Clinical Objectives:**

1. Work effectively with CHNs in specialized settings.
2. Provide care to clients, families, and communities in various community practice settings.

### **Teaching Methods:**

Panel of community health nurses who work in specialized settings.

### **Required Reading:**

Clark, Chapters 25, 28

## CLINICAL INFORMATION



## CLINICAL CONFERENCE SCHEDULE AND ASSIGNMENTS

### Week Topics:

- 8/28: Orientation
- 9/4: Report on initial agency contact and experiences  
One holistic health presentation
- 9/11: Two holistic health presentations
- 9/25: Two holistic health presentations
- 10/2: One holistic health presentation  
Case Presentation
- 10/9: One holistic health presentation  
Case Presentation
- 10/16: One holistic health presentation  
Case Presentation
- 10/23: One holistic health presentation  
Case Presentation
- 10/30: One holistic health presentation  
Case Presentation
- 11/6- One holistic health presentation  
Case Presentation
- 11/13 Case Presentation
- 11/19-23 Thanksgiving Break
- 11/27 Case Presentation
- 12/4 Case Presentation
- 12/11 Case Presentation

Journal Articles: Each week, read and evaluate two articles, related to your clinical experience or to general community health issues. Please cite the article sources. One each week must be from the Internet. Three of the articles are to be from pertinent community health research journals. Please be sure to discuss how these articles might enhance your clinical practice. Fourteen (14) articles are required. Chapters in your text may **not** be used for these readings.

## Clinical Assignments Due Dates

<i>Requirement</i>	<i>Due Date</i>
Memoranda of Understanding	_____
Weekly Reflections Journal	_____
Journal Articles	_____
Case Presentation	_____
Holistic Health Presentation	_____
Clinical Evaluation Tool (Due one week before midterm and final evaluation appointments)	_____
Agency Evaluation (Have mentor complete one at midterm and at final)	_____

## **Holistic Health Presentation**

### **Assignment:**

**Sign up for date and topic** on clinical conference schedule with your clinical faculty.

**Choose** any topic which interests you and would be of value to your colleagues. Topics such as herbs, acupuncture, coining, Mongolian tea, urine therapy prayer etc are appropriate. Consult your instructor if you need ideas for a topic.

**Research** your holistic/alternative health practice or treatment, include:

- Define/describe practice
- What the claims or benefits of the practice?
- What are the risks or side effects?
- Research articles on the topic?
- What is the availability and cost?
- How can the CHN use this information?

**Led an information session and short discussion** with your clinical group.

You may use demonstration, and or audio/video aids to enhance your presentation. A outline or handout is not required.

**Time limit** is 10-15 minutes including discussion.

## Clinical Conference Case Presentation

### Assignment Objectives:

After completion of readings pertinent to the selected client and health care delivery setting and participation in the provision of health care to the client, the student will be able to:

1. Demonstrate completion of a comprehensive individual and family assessment of the selected client.
2. Relate this assessment to the HSU's Department of Nursing philosophy, Modeling and Role-Modeling theory and one other nursing conceptual model (refer to Clark, Chapter 6).
3. Discuss the appropriate ethical principles that might influence the nursing care provided to this client (refer to Clark, Chapter 15).
4. Use appropriate NANDA diagnoses (be sure to include family and developmental ones).
5. Present intervention strategies which outline the contributions of the community health nurse, those of other community health caregivers, and a discussion of the community resources that are or will be used.
6. Discuss the evaluation criteria for the nursing care plan as they relate to the ANA standards in the selected clinical area.

### Instructions:

The student is expected to present a comprehensive nursing care plan to his or her peers. It should follow the assignment objectives and be *succinctly* presented in thirty minutes. Assume that your audience is comprised of interdisciplinary professionals from several agencies.

Turn in a **typed detailed outline** of the assignment to your clinical instructor on the day of the presentation.

# Clinical Record

Name \_\_\_\_\_

Agency \_\_\_\_\_

Week	Articles	Date	# of Hrs	Tot.# Hrs	Insur.	MOU	Goals	Eval MT	Case	Holistic	Eval Final
1								Student			Student
								Faculty			Faculty
2								Agency			Agency
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											

### Clinical Activity Sheet

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Agency: \_\_\_\_\_

<b>0800</b>	
<b>0900</b>	
<b>1000</b>	
<b>1100</b>	
<b>1200</b>	
<b>1300</b>	
<b>1400</b>	
<b>1500</b>	
<b>1600</b>	
<b>1700</b>	
<b>1800</b>	



## Nursing 462

### Student Self-Evaluation of Clinical Performance

**Directions:** Students are to do a narrative midterm and final self-evaluation on the course objectives listed below. Please address how you have met each of these objectives in your clinical

8.1 Utilize leadership behaviors in collaborating with health team members in the community to identify a need for planned change, facilitate this change with a selected group of clients and analyze its effectiveness.  
practice and provide an example for each objective. Please rank your achievements/progress in meeting the course objectives using the legend below. This evaluation is to be typed.

*Criteria for Passing the Clinical Portion of Nursing 462:*

Students must achieve a majority of "S" or above ratings and **NO** "U" ratings to successfully meet clinical requirements. "NI" ratings should be at a minimum (3 or less).

**HL (high level) S (satisfactory) NI (needs improvement) U (unsatisfactory)**

2.1 Utilize Modeling and Role Modeling, nursing process and the appropriate level of prevention in the community focusing on individuals, families, groups and communities.

3.1 Analyze and utilize appropriate communication processes in the coordination with other care providers in the health care of clients in the community.

4.1 Incorporate those nursing practices that demonstrate respect for ethnic identity and socio-cultural practices of clients in the community.

5.1 Provide and evaluate nursing care given to clients in the community according to legal, ethical and professional standards of quality care.

5.2 Assume responsibility and accountability for providing quality care with indirect supervision in a community setting.

5.3 Assist consumers to exercise their rights to select, participate in and evaluate health care.

7.1 Adapt, initiate and evaluate teaching strategies, which are appropriate for peers, and individual clients and groups in the community.

10.1 Collaborate with other health care providers and clients to plan, provide and evaluate nursing and health care.

10.2 Identify and perform professional nursing roles with clients in the community and analyze the implication of those roles.

11.1 Identify through self-evaluation an area in which further learning is needed and select appropriate learning activities in the community to meet identified learning needs.

11.2 Function autonomously seeking appropriate consultation while providing care to clients in the community.

**Nursing 462**  
**FACULTY CLINICAL STUDENT EVALUATION**

Name \_\_\_\_\_

Rating \_\_\_\_\_

Term \_\_\_\_\_

Agency \_\_\_\_\_

*Criteria for Passing the Clinical Portion of Nursing 462:* Students must have a majority of “S” or above ratings and NO “U” ratings to successfully meet clinical objectives. “NI” ratings should be at a minimum (3 or less). **Rating Choices: High Level (HL), Satisfactory (S), Needs Improvement (NI), Unsatisfactory (U).**

Course Objective	Criteria	HL NI	S U
2.1	Utilize Modeling and Role Modeling, nursing process and the appropriate level of prevention in the community focusing on individuals, families, groups and communities.		
3.1	Analyze and utilize appropriate communications processes in the coordination with other care providers in the health care of clients in the community. .		
4.1	Incorporate those nursing practices that demonstrate respect for ethnic identity and socio-cultural practices of clients in the community.		
5.1	Provide and evaluate nursing care given to clients in the community according to legal, ethical and professional standards of quality care.		
5.2	Assume responsibility and accountability for providing quality care with indirect supervision in a community setting.		

<b>Course Objective</b>	<b>Criteria</b>	<b>HL NI</b>	<b>S U</b>
5.3	Assist consumers to exercise their rights to select, participate in and evaluate health care.		
7.1	Adapt, initiate and evaluate teaching strategies that are appropriate for peers, and individual clients and groups in the community.		
8.1	Utilize leadership behaviors in collaborating with health team members in the community to identify a need for planned change, facilitate this change with a select group of clients and analyze its effectiveness.		
10.1	Collaborate with other health care providers and clients to plan, provide and evaluate nursing and health care.		
10.2	Identify and perform professional nursing roles with clients in the community and analyze the implication of those roles.		
11.1	Identify through self-evaluation an area in which further learning is needed and select appropriate learning activities in the community to meet identified learning needs.		
11.2	Function autonomously seeking appropriate consultation while providing care to clients in the community.		

\_\_\_\_\_  
 Midterm: Faculty Signature /Date      Final: Faculty Signature /Date

\_\_\_\_\_  
 Midterm: Student Signature / Date      Final: Student Signature / Date

## **Clinical Placement Thank You Letter**

Students are expected to draft a thank you letter to their agency mentors and pertinent supervisory staff. This letter will be typed on department letterhead (available from clinical instructor) and will be signed by the student and faculty members. This is to be completed by the last week of the semester.

## AGENCY INFORMATION



Department of Nursing  
Humboldt State University  
(707) 826-3215  
(707) 826-5141 FAX

**MEMORANDA OF UNDERSTANDING**

TO:

FROM: Department of Nursing, Humboldt State University-Nursing 462 - Nursing in the Community

DATE:

SUBJECT: Clinical Placement of Senior Nursing Students at \_\_\_\_\_.

---

Responsibility of field placement resource person:

- To be familiar with sponsoring course and objectives.
- To be responsible for orienting faculty and student(s) to agency policy and procedures.
- To counsel the student(s) regarding performance.
- To do a written midterm and final evaluation of student performance.
- To maintain a liaison with Humboldt State University faculty regarding student progress.
- To be responsible for student(s) in the absence of the clinical instructor.

Responsibility of faculty:

- To arrange the clinical placement and assign student(s) to the agency.
- To assure that the student is properly oriented to the agency.
- To monitor the student's progress in the agency through conferences with the student and resource person, evaluation of student's charting and through a supervised home visit(s).
- To facilitate solution of problems which arise in the clinical placement.
- To review the agency evaluation with the student.

Responsibility of the student:

- To spend 16 hours per week in performance of assigned agency functions.
- To be responsible for meeting course and clinical objectives that pertains to the clinical placement.
- To read and comply with all pertinent HSU and agency polices, protocols and procedures.
- To be accountable to the resource person in the performance of functions.
- To maintain a professional relationship with agency personnel.
- To maintain feedback with the resource person and faculty regarding progress in clinical placement.

Clinical Instructor \_\_\_\_\_ Date \_\_\_\_\_

Resource Person \_\_\_\_\_ Date \_\_\_\_\_

Student \_\_\_\_\_ Date \_\_\_\_\_

Department of Nursing  
Humboldt State University  
(707) 826-3215  
(707) 826-5141 FAX

**MEMORANDA OF UNDERSTANDING**

TO:

FROM: Department of Nursing, Humboldt State University-Nursing 462 - Nursing in the Community

DATE:

SUBJECT: Clinical Placement of Senior Nursing Students at \_\_\_\_\_.

---

Responsibility of field placement resource person:

- To be familiar with sponsoring course and objectives.
- To be responsible for orienting faculty and student(s) to agency policy and procedures.
- To counsel the student(s) regarding performance.
- To do a written midterm and final evaluation of student performance.
- To maintain a liaison with Humboldt State University faculty regarding student progress.
- To be responsible for student(s) in the absence of the clinical instructor.

Responsibility of faculty:

- To arrange the clinical placement and assign student(s) to the agency.
- To assure that the student is properly oriented to the agency.
- To monitor the student's progress in the agency through conferences with the student and resource person, evaluation of student's charting and through a supervised home visit(s).
- To facilitate solution of problems which arise in the clinical placement.
- To review the agency evaluation with the student.

Responsibility of the student:

- To spend 16 hours per week in performance of assigned agency functions.
- To be responsible for meeting course and clinical objectives that pertains to the clinical placement.
- To read and comply with all pertinent HSU and agency polices, protocols and procedures.
- To be accountable to the resource person in the performance of functions.
- To maintain a professional relationship with agency personnel.
- To maintain feedback with the resource person and faculty regarding progress in clinical placement.

Clinical Instructor \_\_\_\_\_ Date \_\_\_\_\_

Resource Person \_\_\_\_\_ Date \_\_\_\_\_

Student \_\_\_\_\_ Date \_\_\_\_\_

**Humboldt State University**  
**Nursing 462**

**Explanation of Course Requirements for Agency Mentors**

*Students*

The students enrolled in Nursing 462 are seniors and have completed all of their specialty courses, i.e. Medical-surgical, family, and geriatrics nursing. They are required to have current CPR-Healthcare Provider, malpractice insurance, annual PPD and Hepatitis B vaccine. Faculty also have malpractice insurance.

*Clinical Paperwork*

Students will bring to each agency mentor:

- The Nursing 462 (Nursing in the Community) course overview that outlines the theoretical and clinical objectives for the students.
- Two copies of the Memorandum of Understanding. One copy is signed by the clinical instructor and the agency mentor and is to be returned to the Department for our files, the other copy is given to the mentor for his/her files.
- Two agency evaluation forms asking for formal written feedback about the student's progress at midterm and the semester's end.

*Clinical Lab Hours*

All students are expected to complete 16 hours of clinical practicum each week for eleven-fourteen weeks (see the enclosed academic calendar). Faculty are flexible on this; for example, if a mentor is on vacation for a week, the student may double up on hours the following week. The students meet with their clinical instructor weekly for indirect supervision.

Because these are senior level students, the focus of the clinical portion is on actual provision of care, rather than observational experiences. Students are legally covered to practice by the Board of Registered Nursing, under the supervision of the faculty member.

The Community Health Nursing faculty will maintain contact with each agency mentor to discuss students' progress. We welcome any feedback about the course and its requirements/procedures. Please feel free to call us at any time.

# NURSING 462: NURSING IN THE COMMUNITY

## COURSE OVERVIEW

<b>COURSE TITLE:</b>	Nursing 462 – Nursing In The Community
<b>COURSE CREDIT:</b>	7 units (3 hours lecture, 16 hours lab per week)
<b>COURSE PLACEMENT:</b>	Senior Year
<b>COURSE PREREQUISITES:</b>	N362, 364,350;(N352, N356 R.N.s); Statistics 106
<b>FACULTY:</b> GH 125F	Michelle Kelly, 826-5143, <a href="mailto:mdk4@humboldt.edu">mdk4@humboldt.edu</a> , Marshelle Thobaben, 862-3634, <a href="mailto:mt1@humboldt.edu">mt1@humboldt.edu</a> , GH 125C

## CATALOG DESCRIPTION

Emphasis is on employing the nursing process utilizing modeling and role-modeling and the appropriate level of prevention in the community focusing on individuals, families, groups and communities.

## COURSE OBJECTIVES

- 1.1 Utilize theoretical and empirical knowledge from previous nursing courses, support courses and public health science to gain an understanding of individuals, families, groups and communities.
- 1.2 Develop an understanding of epidemiologic principles, which have implications for the health of a community.
- 2.1 Utilize Modeling and Role-Modeling, nursing process, and the appropriate level of prevention in the community focusing on individuals, families, groups and communities.
- 3.1 Analyze and utilize appropriate communication processes in coordination with other care providers in the health care of clients in the community.
- 4.1 Incorporate those nursing practices, which demonstrate respect for ethnic identity, and socio-cultural practices of clients in the community.
- 5.1 Provide and evaluate nursing care given to clients in the community according to legal, ethical, and professional standards of quality care.
- 5.2 Assume responsibility and accountability for providing quality care with indirect supervision in a community setting.

- 5.3 Assist consumers to exercise their rights to select, participate in and evaluate health care.
- 6.1 Examine the health care delivery system in the U.S. and its impact on community health nursing and identify appropriate nursing actions, reflective of legal, political, geographic, economic, ethical and social influence.
- 6.2 Examine the needs of a rural health care delivery system and function as a liaison between the client and the health care services available in a rural community.
- 6.3 Discuss factors influencing the health of persons in developed and developing countries.
- 6.4 Recognize the socio-political and economic issues in the community, which affect the client's health and health care and serve as an advocate when appropriate.
- 7.1 Adapt, initiate, and evaluate teaching strategies, which are appropriate for peers, and individual clients and groups in the community.
- 8.1 Utilize leadership behaviors in collaborating with health team members in the community to identify a need for planned change, facilitate this change with a selected group of clients and analyze its effectiveness.
- 9.1 Apply research findings to community health nursing practice.
- 10.1 Collaborate with other health care providers and clients to plan, provide and evaluate nursing and health care.
- 10.2 Identify and perform professional nursing roles with clients in the community and analyze the implication of those roles.
- 11.1 Identify through self-evaluation an area in which further learning is needed and select appropriate learning activities in the community to meet identified learning needs.
- 11.2 Function autonomously seeking appropriate consultation while providing care to clients in the community.
- 12.1 Identify the actual and potential commitments and contributions of the community health nurse in society.

## **TEXTS**

### Required

Chinn, James. Control of Communicable Diseases Manual (17<sup>th</sup> ed.) 2000. (APHA)

Clark, Mary Jo, Nursing in the Community: Dimensions of Community Health Nursing (3<sup>rd</sup> ed.) 1999. Stamford, Connecticut: Appleton & Lange.

Erickson, H., Tomlin, E., & Swain, M., (1983). Modeling and Role-Modeling: A theory and paradigm for nursing. Lexington, S.C.: Pine Press.

Nursing 462 Course Packet

Level I & II Textbooks for references

Recommended

Marelli, TM. (1998) Handbook of Home Health Standards and Documentation Guidelines for Reimbursement (3rd ed) St. Louis, Missouri: Mosby-Yearbook, Inc  
Stanhope, M., & Knollmueller, R. (2001) Handbook of Public and Community Nursing Practice (2nd ed) St.Louis, Missouri: Mosby-Yearbook, Inc.

**TEACHING METHODS**

Lecture/discussion, case presentations, applications, vignettes, small group work, clinical conferences, and reflective journals.

**COURSE EVALUATION**

Methods of evaluation include assigned learning experiences, written examinations, and group and individual presentations. The clinical laboratory will include agency and faculty evaluation of student performance in the community settings, students’ self-evaluation, regular student-faculty meetings, weekly journal article reviews, and participation in clinical conferences.

Students with documented learning disabilities requiring the use of the testing center need to make arrangements with the Testing Center to be able to take the test at the same time it is given in the classroom. The faculty need to be notified in writing a head of time to arrange to have the test available in the testing center.

**COMMUNICATION**

Faculty will be communicating course information and updates via e-mail and during class. It is the student’s responsibility to provide the faculty with a current phone numbers and e-mail address at the beginning of the semester. Each faculty will explain their preference for communication with their clinical students.

**LECTURE REQUIREMENTS**

***I. Examinations***

- Exam 1, quizzes and other graded in class activities.....25%
- Exam 2, quizzes and other graded in class activities.....30%
- Exam 3, quizzes and other graded in class activities.....25%

\*\*\* Note: If students have concerns about exam questions, please put these concerns in writing to the appropriate faculty member.

***II. Reading Quizzes***

Each lecture period will begin with a brief quiz on the assigned reading for that week. Please be on time for class. Quizzes may *not* be made up. Points on quizzes will be added to the immediate test. These points effectively become part of the test. Therefore, doing poorly on the weekly quizzes or missing a few may impact your test grade. There may also be in-class exercises that are graded.

***III. Community Health Issues Presentation*** .....10%

***IV. Assessment of Agency Placement***.....05%

***V. Community Health Assessment Model***..... 05%

\*\*\* *Unless otherwise specified, all papers should be typed in APA format. Failure to do so may result in a grade of “F” for that assignment. Guidelines for citing sources from the Internet can be found at: <http://www.apastyle.org/elecref.html>*

**V. Course Midsemester Evaluation**

What do you like about the course so far? What in the course is not working for you? If you were the instructor, what would you do at this point to make the course work better? What can you do to make the course work better for yourself for the remainder of the semester?

**CLINICAL REQUIREMENTS**

**Agency Placements**

Students will be placed in a variety of community health nursing placements. Many of these will expose you to a broader, population-focused role. The faculty recognizes that the student’s placement may not fit his/her personal preferences. If students believe they are facing a difficult situation in their placements, they are to discuss the situation immediately with their clinical faculty. The clinical faculty will help the student identify strategies for dealing with the problem. In rare instances, students have been moved to other placements after consultation with the clinical faculty.

**Students are expected to maintain the highest standard of professionalism in their communication with faculty and agency personnel.** *Failure to act or communicate in a professional manner while in the community health nursing course will result in an automatic failure in the course.* Students are strongly encouraged to discuss this requirement with their faculty to ensure that there is no confusion about what constitutes unprofessional behavior.

**Time Requirements**

The student is expected to complete 16 hours each week for a semester total of 180 hours. The maximum clinical time permitted each week is 2 eight hours days unless otherwise approved by your faculty. ***If students are sick, they must notify their clinical instructor and agency preceptor by 8 am of their clinical day. All clinical absences are to be made up.***

**Clinical Appearance and Behavior**

Each student is expected to comply with the dress code of the Department of Nursing (refer to your Student Handbook) even if your agency's code is more relaxed. If you have questions about the dress code and faculty’s expectations, please clarify these points early in the semester. All students are required to wear their HSU student photo ID in the clinical setting. Failure to comply with dress code and standards may result in probation or possible failure.

**Clinical Equipment**

For those students placed in home health agencies, it is strongly recommended that you have a functioning blood pressure cuff, stethoscope and bandage scissors.

## **Confidentiality**

Because this is a small community, students are reminded of the need to maintain the highest standards of confidentiality. Not only should students refrain from discussing client information indiscreetly, they are not to discuss their concerns about faculty with anyone other than the specific clinical faculty member. A break in confidentiality can result in automatic failure of the course.

## **Travel Time and Insurance**

Students are required to have reliable transportation. Clinical placements are arranged throughout Humboldt and Del Norte Counties.

Students' travel time to agency placements does **not** count as clinical hours. Each student will be asked to verify that he/she has current automobile liability insurance.

Occasionally students may be placed in agencies requiring driving time longer than an hour and a half. In these cases, the clinical faculty may consider travel time as part of the clinical time requirements.

## **Clinical Evaluation**

Students will be evaluated by the faculty and agency mentor. Students are responsible for a narrative self-evaluation at midterm and at the end of the semester.

## **Clinical Supervision**

Students are expected to meet with their clinical faculty to review progress. *A written clinical log documenting their time and experiences is required as part of the student journal.* The faculty will make at least *one* home visit with each student.

## **Weekly Clinical Journal**

Your reflection journal is an integral part of your clinical experience. It is submitted to your clinical instructor weekly on the day of the scheduled clinical conference. It may also be submitted via e-mail. When you discuss your clients, do not use their names, since e-mail is not a confidential data transmission method. If you use email for your journal, copies of your charting are to be turned in regularly as required by your clinical instructor. Your agencies are aware of this requirement and you may copy your charting there. Please whiteout your clients/families' names and addresses.

There are 4 components of the journal:

5. A **log** which documents your time;  
Weekly record of your clinical hours and the type of experiences.
6. **Types of experiences, and a reflective analysis** of them;  
To encourage the ongoing process of self-discovery and critical reflection, consider these questions and record your answers in your journal:  
Reflection
  - What? (What have you learned from this week's experiences? How did you feel before, during, and after your visits to families and agencies? What is your analysis of interdisciplinary and/or interagency meetings in terms of issues being considered, decision-making process, conflict, team functioning.)
  - So What? (How will you function differently as a result of my learning? If so, how?)

- Now What? (How will you use what you have learned? What did you learn that changed your assumptions or strengthened your beliefs and values?)

Client Information

- Biophysical, psychosocial, cognitive and social information
- Health promotion activities
- Self-care abilities
- Internal and external stressors
- Internal and external resources

7. **Journal articles** pertinent to your community placement.

Journal Articles

Each week write a brief summary of *two* articles you have read that are directly related to your clinical experience or to general issues in community health.

Please cite the article sources. Articles from a journal or chapter of a book are both acceptable. Three of the articles are to be from pertinent community health research journals. Please be sure to discuss how the research presented could be applicable to clinical practice. **Fourteen articles** are required for the semester. You may not use chapters in your texts for these required readings.

8. **Clinical goals.**

Individualized clinical goals to be identified by the third week of the semester, and progress noted at midterm and final.

**PASSING NURSING 462**

To pass Nursing 462 the student must satisfactorily complete all required course work. A passing grade of "C" or (2.0) must be obtained in the course by passing both the Theory emphasis with a grade of "C" (2.0) and the Clinical emphasis with a grade of "Pass". The following grade scale will be used:

- 93-100 = A
- 90-92 = A-
- 87-89 = B+
- 83-86 = B
- 80-82 = B-
- 77-79 = C+
- 73-76 = C Passing
- 
- 70-72 = C-
- 60-69 = D

Please refer to the Department of Nursing's Student Handbook, HSU Catalog, Title 5 of the California State Administrative Code, and Laws Relating to Nursing with Rules and Regulations, items 1761 and 2762. Failure to comply with these standards will result in serious consequences.

**Humboldt State University  
Department of Nursing  
Nursing 462**

Name \_\_\_\_\_

Agency \_\_\_\_\_

***Agency Evaluation of Student***

<b>Professional Nursing Behaviors</b>	Consistently	Occasionally	Rarely
Has the student been on time and accountable to agency personnel and clients at all times?			
Has the student conformed to the agency's dress code?			
Has the student demonstrated a professional cooperative manner while in the agency?			
Has the student come prepared for clinical assignments?			
Has the student complied with the agency's work deadlines?			
Has the student directed questions about clients appropriately to either instructor or agency staff?			

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>Application of the Nursing Process</b>	Consistently	Occasionally	Rarely
Ability to assess the population served using observation, communication and theoretical knowledge.			
Ability to formulate clear plans for work with clients and agency requirements.			
Ability to implement nursing care plans which meet the needs of the client population in a safe, humane manner and which comply with agency requirements.			
Demonstrates ongoing self-evaluation of his/her nursing role with agency staff and clients.			

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The community health nursing faculty team would appreciate any other comments you may have on this clinical placement so that we may better serve the needs of your agency and the student.

Student Comments:

Student Goals for Remainder of Semester (to be completed at midterm only)

---

Signature of community nursing mentor/date

---

Student signature/date

Revised 8/2001

**Humboldt State University  
Department of Nursing  
Nursing 462**

Name \_\_\_\_\_

Agency \_\_\_\_\_

*Agency Evaluation of Student*

<b>Professional Nursing Behaviors</b>	Consistently	Occasionally	Rarely
Has the student been on time and accountable to agency personnel and clients at all times?			
Has the student conformed to the agency's dress code?			
Has the student demonstrated a professional cooperative manner while in the agency?			
Has the student come prepared for clinical assignments?			
Has the student complied with the agency's work deadlines?			
Has the student directed questions about clients appropriately to either instructor or agency staff?			

Comments: \_\_\_\_\_

---



---

<b>Application of the Nursing Process</b>	Consistently	Occasionally	Rarely
Ability to assess the population served using observation, communication and theoretical knowledge.			
Ability to formulate clear plans for work with clients and agency requirements.			
Ability to implement nursing care plans which meet the needs of the client population in a safe, humane manner and which comply with agency requirements.			
Demonstrates ongoing self-evaluation of his/her nursing role with agency staff and clients.			

Comments: \_\_\_\_\_

---



---

The community health nursing faculty team would appreciate any other comments you may have on this clinical placement so that we may better serve the needs of your agency and the student.

Student Comments:

Student Goals for Remainder of Semester (to be completed at midterm only)

---

Signature of community nursing mentor/date

---

Student signature/date

Revised 8/2001