



Course Number and Section: (NURS-4433-001IN-SP2024)

Name of Course (Population Focused Community Health Nursing)

Course Semester (Spring 2024)

Internet

Instructor Information: Amber Brodbeck, DNP, CNRA, abrodbeck@com.edu

Course facilitator: Sandra Rondeau, DNP, RN, CNOR, srondeau@com.edu, Office 409-933-8464

Office location: STEM 225-15

Student hours and location: Tuesday and Thursday 0900-1300 or by appointment

Required Textbook/Materials:

Stanhope, M., & Lancaster, J. (2020). Public Health Nursing: Population-Centered Health Care in the Community, 10 edition. St. Louis: Elsevier, Inc.

Resources: Instructor-Led Course:

Evolve Resources for Public Health Nursing, 10th Edition

By Marcia Stanhope and Jeanette Lancaster

ISBN: 9780323582254

Course ID: 159887_srondeau5_1004

Instructor: Sandra Rondeau

Shadow Health: Instructor-Led Course Community Health Digital Clinical Experiences, 1st Edition

ISBN: 9780323753784

Course ID: 165717_srondeau5_5003

Instructor: Sandra Rondeau

Course Description: NURS 4433. POPULATION FOCUSED COMMUNITY HEALTH (LECTURE 3, LAB 4). CREDIT 4. UDCM.

This combined theory and clinical course will explore the role of the community/public health nurse caring for individuals, families, communities, and populations through designing, implementing, and evaluating population-based interventions that promote the health of a community and its members. Emphasis is given to health promotion and disease/injury prevention within vulnerable and at-risk populations and minimizing health consequences of emergency and disaster situations. Entry-level competencies for public health nurses are developed through diverse clinical experiences in virtual and real-world settings.

Course requirements:

- 1. Weekly Discussion Board (12):** Assesses knowledge and application of content integrated within the course. Students will post a primary post supported by cited material according to the grading rubric each week by Thursday and reply to two peers according to the grading rubric by Sunday. All posts must be supported by cited references and contain new material and learning to the discussion.
- 2. Quizzes (5):** Assesses knowledge and application of content integrated within the course. Students will complete quizzes as assigned, each due at midnight on the assigned deadline. The quizzes are multiple choice, multiple answer, and alternative-style questions. The student will have one attempt to complete each quiz, which will be averaged for the quiz grade.
- 3. Case studies (5):** Assesses knowledge and application of content integrated within the course.
- 4. Shadow Health Community Health DCE modules:** Students will complete online avatar assignments in Shadow Health. **Shadow Health modules**
- 5. Community Project/Summary:** The student will choose a community of interest (city or town) and research that area to address a specific social determinant. The student will complete a detailed windshield survey of the selected community to create a plan of care including assessment, diagnosis, plan, implementation, and will provide an evaluation of the specified social determinant in the community. Additionally, a summary section is included in the grading criteria. *(See Appendix B for Community Plan of Care and Summary Rubric)*

Determination of Course Grade/Detailed Grading Formula:

Grading Scale

- A = 90 -100.00
- B = 80 -89.99
- C = 70 -79.99
- D = 60 -69.99
- F = < 60

Grade Calculation

Assignments	%
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Weekly discussion board (13)	25 %
Weekly Quizzes (5)	12.50 %
Case studies (5)	12.50 %
Shadow Health Community Health Nursing Modules**	15%
Windshield Survey	10 %
Community Plan of Care/Summary*	25 %
Grade Total	100%
A Grade Total of at least 70% is required to pass the course. The student must "Meet Expectations" on all competencies on the Community Plan of Care/Summary to pass the course.* All Shadow Health Competencies must be above 85 % to pass the course **	

Late Work, Make-Up, and Extra-Credit Policy: Assignments are due by designated due date, there is no make-up or extra credit opportunities.

Attendance Policy:

See the Attendance policy in the Nursing Student Handbook.

Communicating with your instructor: ALL electronic communication with the instructor must be through your COM email. Due to FERPA restrictions, faculty cannot share any information about performance in the class through other electronic means. (Faculty may add additional statement requiring monitoring and communication expectations via D2L or other LMS).

Course Objectives/Student Learning Outcomes

Upon completion of this course, the student will:

Student Learner Outcome	Maps to Core Objective	Assessed via this Assignment
1. Explore principles of public health science and population-focused care at local, national, and global levels.	1. Synthesize knowledge, skills, and values from the arts, sciences, and humanities as an exemplar of professional nursing and an advocate of social justice.	Shadow health Community health modules
2. Describe how to coordinate and plan evidence-based nursing interventions for communities based on population-focused nursing process.	2. Provide comprehensive patient-centered care utilizing an organized framework to make individual, community, and population-based decisions grounded in evidence-based practice.	Community Health Care Plan and Summary Assignment

3. Discuss research findings from multiple disciplines to facilitate and evaluate evidence-based practice in the community.	3. Utilize data to monitor outcomes of care and improvement methods to continuously improve the quality and safety of nursing care to minimize risk of harm individually and across the healthcare system.	Discussion board assignment week 3
4. Recommend comprehensive nursing care that reflects human caring for diverse populations through multidisciplinary collaborations.	2. Provide comprehensive patient-centered care utilizing an organized framework to make individual, community, and population-based decisions grounded in evidence-based practice.	Discussion board week 4
5. Assess the levels of prevention to improve health outcomes of diverse populations.		Community Health Care Plan and Summary Assignment

Academic Dishonesty

Any incidence of academic dishonesty will be dealt with in accordance with college policy and the Student Handbook. Academic dishonesty, such as cheating on exams, is an extremely serious offense. See Behavior/Conduct policy in the Nursing Student Handbook.

Student Concerns: If you have any questions or concerns about any aspect of this course, please contact me using the contact information previously provided. If, after discussing your concern with me, you continue to have questions, please contact Debra Bauer, DNP, MBA Director of Nursing [Dbauer3@com.edu, 409-933-8908

Course outline: Located at end of syllabus.

Textbook Purchasing Statement:

A student attending College of the Mainland is not under any obligation to purchase a textbook from the college-affiliated bookstore. The same textbook may also be available from an independent retailer, including an online retailer.

Methods of Instruction

- Case studies
- Assignments
- Audio-visual instructional aids
- Written Reports/Clinical Reasoning exercises

Tardiness

See Attendance policy in the Nursing Student Handbook.

Withdrawal

See Admission, Progression, Dismissal, & Readmission policy in the Nursing Student Handbook.

Classroom Conduct Policy/Student Conduct

Classroom Conduct Policy: College of the Mainland requires that students enrolled at COM be familiar with the Standards of Student Conduct, which can be found in the on-line Student Handbook. <http://www.com.edu/student-services/studenthandbook.php> . Students should act in a professional manner at all times. Disruptive students will be held accountable according to college policy. Any violations of the Code of Conduct will result in a referral to the Office for student Conduct and may result in dismissal from this class.

In addition to the Standards of Student Conduct found in the online COM Student Handbook (<http://www.com.edu/student-services/student-handbook.php>), nursing students are expected to demonstrate good professional character as defined in in BON Rule 213.27 (http://bon.texas.gov/rr_current/213-27.asp). See Behavior/Conduct in the Nursing Student Handbook.

Plagiarism

Plagiarism is using someone else’s words or ideas and claiming them as your own. Plagiarism is a very serious offense. Plagiarism includes paraphrasing someone else’s words without giving proper citation, copying directly from a website and pasting it into your paper, using someone else’s words without quotation marks. Any assignment containing plagiarized material will receive a **grade of zero** and the student will be referred to the Office of Student Conduct for the appropriate disciplinary action. Also see the Behavior/Conduct policy in the Nursing Student Handbook.

Institutional Policies and Guidelines

Grade Appeal Process: Concerns about the accuracy of grades should first be discussed with the instructor. A request for a change of grade is a formal request and must be made within six months of the grade assignment. Directions for filing an appeal can be found in the student handbook https://www.com.edu/student-services/docs/Student_Handbook_2023-2024_v2.pdf. An appeal will not be considered because of general dissatisfaction with a grade, penalty, or outcome of a course. Disagreement with the instructor’s professional judgment of the quality of the student’s work and performance is also not an admissible basis for a grade appeal.

Academic Success & Support Services: College of the Mainland is committed to providing students with the necessary support and tools for success in their college careers. Support is offered through our Tutoring Services, Library, Counseling, and through Student Services. Please discuss any concerns with your faculty or an advisor.

ADA Statement: Any student with a documented disability needing academic accommodation is requested to contact Kimberly Lachney at 409-933-8919 or klachney@com.edu. The Office of Services for Students with Disabilities is located in the Student Success Center.

Textbook Purchasing Statement: A student attending College of the Mainland is not under any obligation to purchase a textbook from the college-affiliated bookstore. The same textbook may also be available from an independent retailer, including an online retailer.

Withdrawal Policy: Students may withdraw from this course for any reason prior to the last eligible day for a “W” grade. Before withdrawing students should speak with the instructor and consult an advisor. Students are permitted to withdraw only six times during their college career by state law. The last date to withdraw from the 1st 8-week session is October 11. The last date to withdraw from the 16-week session is November 28. The last date to withdraw for the 2nd 8-week session is December 7.

FN Grading: The FN grade is issued in cases of failure due to a lack of attendance, as determined by the instructor. The FN grade may be issued for cases in which the student ceases or fails to attend class, submit assignments, or participate in required capacities, and for which the student has failed to withdraw. The issuing of the FN grade is at the discretion of the instructor. The last date of attendance should be documented for submission of an FN grade.

Early Alert Program: The Student Success Center at College of the Mainland has implemented an Early Alert Program because student success and retention are very important to us. I have been asked to refer students to the program throughout the semester if they are having difficulty completing assignments or have poor attendance. If you are referred to the Early Alert Program you will be contacted by someone in the Student Success Center who will schedule a meeting with you to see what assistance they can offer in order for you to meet your academic goals.

Resources to Help with Stress:

If you are experiencing stress or anxiety about your daily living needs including food, housing or just feel you could benefit from free resources to help you through a difficult time, please click here <https://www.com.edu/community-resource-center/>. College of the Mainland has partnered with free community resources to help you stay on track with your schoolwork, by addressing life issues that get in the way of doing your best in school. All services are private and confidential. You may also contact the Dean of Students office at deanofstudents@com.edu
Avoiding Plagiarism: <http://www.plagiarism.org/>

Successful Tips for Students

Schedule time to study based on the difficulty of the content. Use this table as a guide:

Course Difficulty	Study Hours Per Week Per Hour in Class
High Difficulty Course	3 hours
Medium Difficulty Course	2 hours
Low Difficulty Course	1 hour

http://www.usu.edu/arc/StudySmart/pdf/estimating_study_hours.pdf

Read assignments before class or clinical. Here are some strategies for getting the most out of your college textbooks:

- 4 Steps to Reading a Textbook:
<http://www.studyright.net/blog/4-steps-to-reading-a-textbook-quickly-and-effectively/>
- Active Reading Strategies:
<http://www.princeton.edu/mcgraw/library/for-students/remember-reading/>
- The Reading Cycle: Plan-Do-Review
<http://www2.swccd.edu/~asc/lrnlinks/txttrdg.html>
- How to Read Your Textbooks More Efficiently College Info Geek (video)
<https://www.youtube.com/watch?v=tgVjmFSx7rg>
- 5 Active Reading Strategies for Textbook Assignments College Info Geek (video)
[5 Active Reading Strategies for Textbook Assignments - College Info Geek](#)

ANA Scope and Standards of Practice

Students are expected to adhere to established ANA Scope and Standards of Practice (2015)

Student Handbooks

Students are expected to adhere to all policies outlined in the College and Nursing Program student handbooks.

Syllabus Revisions

Faculty reserves the right to make changes to the syllabus as deemed necessary.

The Speaking, Reading, and Writing Center

The Speaking, Reading and Writing Center provides free tutoring services to students, staff and faculty seeking assistance for writing, reading and oral presentations for academic and non-academic assignments/projects. Located in the Technical Vocational Building, Room 1306, the center provides face-to-face and online tutoring sessions in a welcoming environment. Appointments can be made in person, or on the center scheduler at com.mywconline.com, or by clicking the SRWC icon on the COM website.

Surviving Active Shooter Event Reference and Training Videos

Run, Hide, Fight * **(Mandatory)**

<https://www.youtube.com/watch?v=5VcSwejU2D0>

Last Resort ACTIVE SHOOTER SURVIVAL Measures by Alon Stivi

<https://www.youtube.com/watch?v=r2tleRUBRHw>

Surviving an Active Shooter Event - Civilian Response to Active Shooter

<https://www.youtube.com/watch?v=j0It68YxLQQ>

Make the Call * **(Mandatory)** <https://www.youtube.com/watch?v=AWaPp-8k2p0>

Discussion Questions:

1. What is your plan while in class to consider running, hiding, or fighting to survive?
2. How would you lock your classroom and/or barricade entry into the classroom?
3. What would you use to improvise weapons to take down the shooter / aggressor?

4. If you have to fight, would you COMMIT to the fight to save your life and others?
5. If you have a License to Carry and are concealed carrying, what guidelines would you follow?
6. Do you have the campus police emergency number and non-emergency number programmed into your phone?
 - a. COM Police Emergency number (409-933-8599)
 - b. COM Police Non-Emergency number (409-933-8403).
7. When the police arrive why would you have your hands up and follow all commands?
8. Why is it important to make the call to report any suspicious person or activity to campus police?

Course Content

Unit 1: The Foundations of Specialization in Public Health Nursing

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. State the mission of and core functions of public health and essential public health services and the quality performance standards program in public health.
2. Describe specialization in public health nursing and other nurse roles in the community and the practice goals of each.
3. Contrast clinical nursing practice with population focused practice in the community.
4. Describe what is meant by community and prevention-oriented, population-focused practice.
5. Name barriers to acceptance of community and prevention-oriented, population-focused practice.
6. State key opportunities for community and prevention-oriented, population-focused practice.

Learning Content:

- I. Public Health Practice: The Foundation for Health Populations and Communities
 - A. Definitions in Public Health
 - B. Public Health Core Functions
 - C. Core Competencies of Public Health Professionals
 - D. Quality Improvement Efforts in Public Health
- II. Public Health Nursing as a field of Practice: An Area of Specialization
 - A. Educational Preparation for Public Health Nursing
 - B. Population-Focused Practice Versus Practice Focused on Individuals
 - C. Public Health Nursing Specialists and Core Public Health Functions: Selected Examples
- III. Public Health Nursing Versus Community-Based Nursing
- IV. Roles in Public Health Nursing
- V. Challenges for the Future
 - A. Barriers to Specializing in Public Health Nursing
 - B. Developing Population-Focused Nurse Leaders
 - C. Shifting Public Policy toward Creating Conditions for Healthy Population

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 1.
Discussion Board: Challenges for the Future

Unit 2: History of Public Health and Public Community Health Nursing

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Interpret the focus and roles of public health nurses through a historical approach.
2. Trace the ongoing interaction between the practice of public health and that of nursing.
3. Discuss the dynamic relationship between the practice of public health and that of nursing.
4. Outline the professional and practice impact of individual leadership on population-centered nursing, especially the leadership of Florence Nightingale and Lillian Wald.
5. Identify structures for delivery of nursing care in the community such as settlement houses, visiting nurse associations, official health organizations, and schools.
6. Recognize major organizations that contributed to the growth and development of population-centered nursing.

Learning Content:

- I. Change and Continuity
- II. Public Health during America's Colonial Period and the New Republic
- III. Nightingale and the Origins of Trained Nursing
- IV. America Needs Trained Nurses
- V. School Nursing in America
- VI. The Professional Comes of Age
- VII. Public Health Nursing in Official Health Agencies in World War I
- VIII. Paying the Bill for Public Health Nursing
- IX. African-American Nurses in Public Health Nursing
- XII. Between the Two World Wars: Economic Depression and the Rise of Hospitals
- XIII. The Rise of Chronic Illness
- XV. Declining Financial Support for Practice and Professional Organizations
- XVI. Professional Nursing Education for Public Health Nursing
- XVII. New Resources and New Communities: The 1960s and Nursing
- XVIII. Community Organization and Professional Change
- XVIX. Public Health Nursing from the 1970s into the Twenty-First Century
- XX. Public Health Nursing Today.

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 2.

Discussion Board: Clinical Decision-Making Activities

Unit 3: The Changing U.S. Health and Public Health Care Systems

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe the events and trends that influence the status of the health care system.
2. Discuss key aspects of private health care system.
3. Compare the public health system to primary care.
4. Explain the model of primary health care.
5. Assess the effects of health care and insurance reform on health care delivery.
6. Evaluate the changes needed in public health and primary care to have an integrated health care delivery system.

Learning Content:

- I. Health Care in the United States
- II. Forces Stimulating Change in the Demand for Health Care
 - A. Demographic Trends
 - B. Social and Economic Trends
 - C. Health Workforce Trends
 - D. Technological Trends
- III. Current Health Care System in the United States
 - A. Primary Care System
 - B. Public Health System
 - C. The Federal System
 - D. The State System
 - E. The Local System
- IV. Forces Influencing Changes in the Health Care System
 - A. Integration of Public Health and the Primary Care Systems
 - B. Potential Barriers to Integration
 - C. Primary Health Care
 - D. Promoting Health/Preventing Disease: Year 2020 Objectives for the Nation
- V. Health Care Delivery Reform Efforts—United States

- XVII. New Resources and New Communities: The 1960s and Nursing
- XVIII. Community Organization and Professional Change
- XIX. Public Health Nursing from the 1970s into the Twenty-First Century
- XX. Public Health Nursing Today.

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 3.

Discussion Board: Clinical Decision-Making Activities

Unit 4: Perspectives in Global Health Care

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Identify the major aims and goals for global health that have been presented by the Millennium global Developmental Goals: 2013 Report
2. Identify the health priorities of Health for All in the 21st Century (HFA21) and Healthy People 2020.
3. Analyze the role of nursing in global health.
4. Explain the role and focus of a population-based approach for global health.
5. Discuss the many causes of global health problems.
6. Identify some solutions for at least one of these global health problems.
7. Describe how global health is related to economic, industrial, environmental, and technological development.
8. Compare and contrast the health care system in developed country with one in a less developed country.
9. Define burden of disease.
10. Explain how countries can prepare for natural and manmade disasters and the role of nurses in these efforts.
11. Describe at least five organizations that are involved in global health.

Learning Content:

- I. Overview and Historical Perspective of Global Health
- II. The Role of Public Health
- III. Primary Health Care
- IV. Major Global Health Organizations
- V. Global Health and Global Development
- VI. Health Care Systems
 - A. The Netherlands
 - B. Mexico
 - C. Uganda
 - D. Ecuador
 - E. The United Kingdom
 - F. China
- VII. Major Global Health Problems and the Burden of Disease
 - A. Communicable Diseases
 - B. Diarrheal Disease
 - C. Maternal and Women's Health
 - D. Nutrition and World Health
 - E. Natural and Man-Made Disasters

Learning Activities:

Read Stanhope, M., & Lancaster, J. (2020). Chapter 4.
Discussion Board: Clinical Decision-Making Activities

Unit 5: Economics of Health Care Delivery

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Relate public health and economic principles to nursing and health care.
2. Describe the economic theories of microeconomics and macroeconomics.
3. Identify major factors influencing national health care spending.
4. Analyze the role of government and other third-party payers in health care financing.
5. Identify mechanisms for public health financing of services.
6. Discuss the implications of health care rationing from an economic perspective.
7. Evaluate levels of prevention as they related to public health economics.

Learning Content:

- I. Public Health and Economics
- II. Principles of Economics
 - A. Supply and Demand
 - B. Efficiency and Effectiveness
 - C. Macroeconomics
 - D. Measures of Economic Growth
 - E. Economic Analysis Tools
- III. Factors Affecting Resource Allocation in Health Care
 - A. The Uninsured
 - B. Access to Health Services
 - C. Rationing Health Care
 - D. Healthy People 2020
- IV. Primary Prevention
- V. The Context of the U.S. Health Care System
 - A. First Phase
 - B. Second Phase
 - C. Third Phase
 - D. Fourth Phase
 - E. Challenges for the Twenty-First Century
- VI. Trends in Health Care Spending
- VII. Factors Influencing Health Care Costs
 - A. Demographics Affecting Health Care
 - B. Technology and Intensity
 - C. Chronic Illness
- VIII. Financing of Health Care
 - A. Public Support
 - B. Public Health
 - C. Other Public Support
 - D. Private Support
- IX. Health Care Payment Systems
 - A. Paying Health Care Organizations
 - B. Paying Health Care Practitioners

Learning Activities:

Read Stanhope, M., & Lancaster, J. (2016). Chapter 5.
Discussion Board: Clinical Decision-Making Activities

Unit 6: Application of Ethics in the Community

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe a brief history of ethics of nursing practice.
2. Analyze ethical decision-making processes.
3. Compare and contrast ethical theories and principles, virtue ethics, caring and ethic of caring, and feminist ethics.
4. Comprehend the ethics inherent in the core functions of public health nursing.
5. Analyze codes of ethics for nursing and for public health.

Learning Content:

- I. History
- II. Ethical Decision Making
- III. Ethics
 - A. Definition, Theories, Principles
 - B. Virtue Ethics
 - C. Caring and the Ethic of Care
 - D. Feminist Ethics
- IV. Ethics and the Core Functions of Population-Centered Nursing Practice
 - A. Assessment
 - B. Policy Development
 - C. Assurance
- V. Nursing Code of Ethics
- VI. Public Health Code of Ethics
- VI. Advocacy and Ethics
 - A. Codes and Standards of Practice
 - B. Conceptual Framework of Advocacy
 - C. Practical Framework for Advocacy
 - D. Advocacy: Issues That Have Ethical Implications

Learning Activities:

Read Stanhope, M., & Lancaster, J. (2016). Chapter 6.

Discussion Board: Clinical Decision-Making Activities

Unit 7: Cultural Diversity in the Community

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe the process for developing cultural competence to meet the health care needs of culturally diverse individuals, communities, and organizations.
2. Describe major facilitators and barriers to providing quality health care for diverse populations.
3. Identify culturally competent nursing interventions to promote positive health outcomes for culturally diverse clients.
4. Evaluate the role of the public health nurse in providing culturally competent nursing care.
5. Use case scenario to chart the five elements of cultural competence as described by Campinha-Bacote.
6. Use electronic resources to locate current databases about culturally competent practices that reduce health disparities.

Learning Content:

- I. Culture, Race, and Ethnicity
 - A. Culture
 - B. Race
 - C. Ethnicity
- II. Cultural Diversity
 - A. Cultural Variations Among Selected Groups
 - B. Immigrants and Cultural Diversity
- III. Cultural Diversity and Health Disparities
 - A. Disparities in Health
 - B. Social Determinants of Health
 - C. Health Equity
 - D. Social Justice
 - E. Marginalization
 - F. Health Literacy
 - G. Health Disparities and Socioeconomic Status

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 7.

Discussion Board: Clinical Decision-Making Activities

Unit 8: Public Health Policy

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Discuss the structure of the U.S. government and health care roles.
2. 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.
3. Differentiate between the primary bodies of law that affect nursing and health care.
4. Define key terms related to policy and politics.
5. State the relationships between nursing practice, health policy, and politics.
6. Develop and implement a plan to communicate with policy makers on a chosen public health issue.

Learning Content:

- I. Definitions
- II. Governmental Role in U.S. Health Care
 - A. Trends and Shifts in Governmental Roles
 - B. Government Health Care Functions
- III. Healthy People 2020: An Example of National Health Policy Guidance
- IV. Organizations and Agencies that Influence Health
 - A. International Organizations
 - B. Federal Health Agencies
 - C. Federal Non-Health Agencies
 - D. State and Local Health Departments
- V. Impact of Government Health Functions and Structures on Nursing
- VI. The Law and Health Care
 - A. Constitutional Law
 - B. Legislation and Regulation
 - C. Judicial and Common Law
- VII. Laws Specific to Nursing Practice
 - A. Scope of Practice
 - B. Professional Negligence
- VIII. Legal Issues Affecting Health Care Practices
 - A. School and Family Health
 - B. Home Care and Hospice
 - C. Correctional Health
- IX. The Nurse's Role in the Policy Process
 - A. Legislative Action
 - B. Regulatory Action
 - C. The Process of Regulation
 - D. Nursing Advocacy

Learning Activities:

Read Stanhope, M., & Lancaster, J. (2020). Chapter 8.
Discussion Board: Clinical Decision-Making Activities

Unit 9: Population-Based Public Health Nursing Practice

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Identify the components of the Intervention Wheel.
2. Describe the assumption underlying the Intervention Wheel.
3. Define the wedges and interventions of the Intervention Wheel.
4. Differentiate among three levels of practice (community, systems, and individual/family)..
5. Apply the nursing process at three levels of practice.

Learning Content:

- I. The Intervention Wheel Origins and Evolution
- II. Assumptions Underlying the Intervention Wheel
 - A. Assumption 1: Defining Public Health Nursing Practice
 - B. Assumption 2: Public Health Nursing Practice Focuses on Populations
 - C. Assumption 3: Public Health Nursing Practice Considers the Determinants of Health
 - D. Assumption 4: Public Health Nursing Practice Guided by Priorities Identified Through an Assessment of Community
 - E. Assumption 5: Public Health Nursing Practice Emphasizes Prevention
 - F. Assumption 6: Public Health Nurses Intervene at All Levels of Practice
 - G. Assumption 7: Public Health Nursing Practice Uses the Nursing Process at All Levels
 - H. Assumption 8: Public Health Nursing Practice Uses a Common Set of Interventions Regardless of Practice Setting
 - I. Assumption 9: Public Health Nursing Practice Contributes to the Achievement of the 10 Essential Services
 - J. Assumption 10: Public Health Nursing Practice Is Grounded in a Set of Values and Beliefs
- III. Using the Intervention Wheel in Public Health Nursing Practice Components of the Model
 - A. Component 1: The Model Is Population Based
 - B. Component 2: The Model Encompasses Three Levels of Practice
 - C. Component 3: The Model Identifies and Defines 17 Public Health Interventions
- IV. Adoption of the Intervention Wheel in Practice, Education, and Management
 - A. *Healthy People 2020*
- V. Applying the Nursing Process in Public Health Nursing Practice
- VI. Applying the Process at the Individual/Family Level
 - A. Community Assessment
 - B. Public Health Nursing Process: Assessment of a Family
 - C. Public Health Nursing Process: Diagnosis
 - D. Public Health Nursing Process: Planning (Including Selection of Interventions)
 - E. Public Health Nursing Process: Implementation
 - F. Public Health Nursing Process: Evaluation
- VII. Applying the Public Health Nursing Process at the Community Level of Practice Scenario
 - A. Community Assessment (Public Health Nursing Process: Assessment)
 - B. Community Diagnosis (Public Health Nursing Process: Diagnosis)
 - C. Community Action Plan (Public Health Nursing Process: Planning, Including Selection of Interventions)
 - D. Community Implementation Plan (Public Health Nursing Process: Implementation)

E. Community Evaluation (Public Health Nursing Process: Evaluation)

VIII. Applying the Public Health Nursing Process to a Systems Level of Practice Scenario

A. Public Health Nursing Process: Assessment

B. Public Health Nursing Process: Diagnosis

C. Public Health Nursing Process: Planning (Including Selection of Interventions)

D. Public Health Nursing Process: Implementation

E. Public Health Nursing Process: Evaluation

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 9.

Discussion Board: Clinical Decision-Making Activities

Unit 10: Environmental Health

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Explain the relationship between the environment and human health and disease.
2. Understand the key disciplines that inform nurses' work in environmental health.
3. Apply the nursing process to the practice of environmental health.
4. Describe legislative and regulatory policies that have influenced the impact of the environment on health and disease patterns in communities
5. Explain and compare the environment health roles for nurses practicing in public health, as well as those practicing in practice settings.
6. Incorporate environmental principles into practice.

Learning Content:

- I. *Healthy People 2020* Objectives for Environmental Health
- II. Historical Context
- III. Environmental Health Sciences
 - A. Toxicology
 - B. Epidemiology
 - C. Geographic Information Systems
 - D. Multidisciplinary Approaches
- IV. Climate Change
- V. Environmental Health Assessments
 - A. Information Sources
- VI. Applying the Nursing Process to Environmental Health
 - A. Individual Environmental Exposure History
 - B. Community-wide Environmental Health Assessment Tools
- VII. Environmental Exposure by Media
 - A. Air
 - B. Water
 - C. Land and Soil
 - D. Food
- VIII. Right to Know
- IX. Risk Assessment
- X. Vulnerable Populations
 - A. Children's Environmental Health
- XI. Precautionary Principle
- XII. Environmental Health Risk Reduction
 - A. Industrial Hygiene Hierarchy of Controls
 - B. Risk Communication
- XIII. Governmental Environmental Protection
- XIV. Policy and Advocacy
 - A. Environmental Justice and Environmental Health Disparities
 - B. Environmental Health Threats from the Health Care Industry: New Opportunities for Advocacy
- XV. Referral Resources

XVI. Roles for Nurses in Environmental Health

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 10.

Discussion Board: Clinical Decision-Making Activities

Unit 11: Genomics in Public Health

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Define key terms related to genetics and genomics.
2. Discuss the history of genomics and its integration into public health nursing.
3. Describe the relationship between genomics, genetics, and nursing.
4. Explain the core competencies related to genomics that nurses and selected other public health professionals should integrate into their practice.
5. Describe at least three potential implications of persons knowing their genetic information on client, families, and communities.

Learning Content:

- I. The Human Genome and Its Transforming Effect on Public Health
- II. A Brief History of the Science
- III. DNA and Its Relationship to Genomics and Genetics
 - A. The Challenges of Genetic and DNA Testing
- IV. Current Issues in Genomics and Genetics
 - A. Ethical and Legal Considerations
 - V. Personalized Health Care
 - VI. Genomic Competencies for the Public Health Workforce
 - VII. Incorporating Genomics and Genetics into Public Health Nursing Practice
 - A. Professional Practice Domain: Nursing Assessment: Applying/Integrating Genetic and B. Genomic Knowledge
 - C. Identification
 - D. Referral
 - E. Provision of Education, Care, and Support
 - VIII. Application and Practice: Mapping out a Pedigree
 - IV. The Future

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 11.

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Unit 12: Epidemiology

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Define epidemiology and describe its essential elements and approach.
2. Describe current and historical contexts of the development of the field of epidemiology.
3. Identify key elements of the epidemiologic triangle and the ecological model and describe the interactions among these elements in both models.
4. Explain the relationship of the natural history of disease to the three levels of prevention and to the design and implementation of community interventions.
5. Interpret basic epidemiologic measures of morbidity (disease) and mortality (death).
6. Discuss descriptive epidemiologic parameters of person, place, and time.
7. Describe key features of common epidemiologic study designs.
8. Describe essential characteristics and methods of evaluating a screening program.
9. Identify the most common sources of bias in epidemiologic studies.
10. Evaluate the epidemiologic research and apply findings to nursing practice.
11. Discuss the role of the nurse in epidemiologic surveillance and primary, secondary, and tertiary prevention.

Learning Content:

- I. Definitions of Health and Public Health
- II. Definitions and Descriptions of Epidemiology
- III. Historical Perspectives
- IV. Basic Concepts in Epidemiology
 - A. Measures of Morbidity and Mortality
 - B. Epidemiologic Triangle, Web of Causality, and the Ecologic Model
 - C. Social Epidemiology
 - D. Levels of Preventive Interventions
- V. Screening
 - A. Reliability and Validity
- VI. Surveillance
- VII. Basic Methods in Epidemiology
 - A. Sources of Data
 - B. Rate Adjustment
 - C. Comparison Groups
- VIII. Descriptive Epidemiology
 - A. Person
 - B. Place
 - C. Time
- IX. Analytic Epidemiology
 - A. Cohort Studies
 - B. Case-control Studies
 - C. Cross-sectional Studies
 - D. Ecologic Studies
- X. Experimental Studies
 - A. Clinical Trials

B. Community Trials

XI. Causality

A. Statistical Associations

B. Bias

C. Assessing for Causality

XII. Applications of Epidemiology in Nursing

A. Community-oriented Epidemiology

B. Popular Epidemiology

Learning Activities:

Read Stanhope, M., & Lancaster, J. (2020). Chapter 12.

Discussion Board: Clinical Decision-Making Activities

Unit 13: Infectious Disease Prevention and Control

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Discuss the current impact and threats of infectious diseases on society.
2. Explain how the elements of the epidemiologic triangle interact to cause infectious disease.
3. Provide examples of infectious disease control interventions at the three levels of public health prevention.
4. Explain the multisystem approach to control of communicable diseases.
5. Discuss the factors contributing to newly emerging or re-emerging infectious diseases.
6. Define the bloodborne pathogen reduction strategy and universal precautions.

Learning Content:

- I. Historical and Current Perspectives
- II. Transmission of Communicable Diseases
 - A. Agent, Host, and Environment
 - B. Modes of Transmission
 - C. Disease Development
 - D. Disease Spectrum
- III. Surveillance of Communicable Diseases
 - A. Elements of Surveillance
 - B. Surveillance for Agents of Bioterrorism
 - C. List of Reportable Diseases
- IV. Emerging Infectious Diseases
 - A. Emergence Factors
 - B. Examples of Emerging Infectious Diseases
- V. Prevention and Control of Infectious Diseases
 - A. Planning to Address Infectious Disease
 - B. Prevention and Control Programs
 - C. Primary, Secondary, and Tertiary Prevention
 - D. Role of Nurses in Prevention
 - E. Multisystem Approach to Control
- VI. Agents of Bioterrorism
 - A. Anthrax
 - B. Smallpox
 - C. Plague
 - D. Tularemia
- VII. Vaccine-Preventable Diseases
 - A. Routine Childhood Immunization Schedule
 - B. Measles
 - C. Rubella
 - D. Pertussis
 - E. Influenza
- VIII. Foodborne and Waterborne Diseases
 - A. The Role of Safe Food Preparation
 - B. Salmonellosis

- C. Enterohemorrhagic *Escherichia coli* (EHEC or *E. coli* 0157:H7)
- IX. Waterborne Disease Outbreaks and Pathogens
- X. Vectorborne Diseases
 - A. Lyme Disease
 - B. Rocky Mountain Spotted Fever
 - C. Prevention and Control of Tickborne Diseases
- XI. Diseases of Travelers
 - A. Malaria
 - B. Foodborne and Waterborne Diseases
 - C. Diarrheal Diseases
- XII. Zoonoses
 - A. Rabies (Hydrophobia)
- XIII. Parasitic Diseases
 - A. Intestinal Parasitic Infections
 - B. Parasitic Opportunistic Infections
 - C. Control and Prevention of Parasitic Infections
- XIV. Health Care-Associated Infections
 - A. Universal Precautions

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 13.

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Unit 14: Communicable and Infectious Disease Risks

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe natural history of human immunodeficiency virus (HIV) and appropriate client education at each stage.
2. Explain the clinical signs of selected communicable diseases.
3. Evaluate the trends in incidence of HIV, STDs, hepatitis, and tuberculosis, and identify groups that are at greatest risk.
4. Analyze behaviors that place people at risk of contracting selected communicable diseases.
5. Evaluate nursing activities to prevent and control selected communicable diseases.
6. Explain the various roles of nurses in providing care for those with selected communicable diseases.

Learning Content:

- I. Human Immunodeficiency Virus Infection
 - A. Natural History of HIV
 - B. Transmission
 - C. Epidemiology of HIV/AIDS
 - D. HIV Surveillance
 - E. HIV Testing
 - F. Perinatal and Pediatric HIV Infection
 - G. HIV Stage 3 (AIDS) in the Community
 - H. Resources
- II. Sexually Transmitted Diseases
 - A. Gonorrhea
 - B. Syphilis
 - C. Chlamydia
 - D. Herpes Simplex Virus (Genital Herpes)
 - E. Human Papillomavirus Infection
- III. Hepatitis
 - A. Hepatitis A Virus
 - B. Hepatitis B Virus
 - C. Hepatitis C Virus
 - D. Non-ABC Hepatitis
- IV. Tuberculosis
 - A. Epidemiology
 - B. Diagnosis and Treatment
- V. Nurse's Role in Providing Preventive Care for Communicable Diseases
 - A. Primary Prevention
 - B. Secondary Prevention
 - C. Tertiary Prevention

Learning Activities:

Read Stanhope, M., & Lancaster, J. (2020). Chapter 14.

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Unit 15: Evidence-Based Practice

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Definition of Evidence-Based Practice
2. Understand the history of evidence-based practice in health care.
3. Analyze the relationship between evidence-based practice and the practice of nursing in the community.
4. Provide examples of evidence-based practice in the community.
5. Identify barriers to evidence-based practice.
6. Apply evidence-based resources in practice.

Learning Content:

- I. Definition of Evidence-Based Practice
- II. History of Evidence-Based Practice
- III. Paradigm Shift in Use of Evidence-Based Practice
- IV. Types of Evidence
- V. Factors Leading to Change
- VI. Barriers to Evidence-Based Practice
- VII. Steps in the Evidence-Based Practice Process
 - A. Approaches to Finding Evidence
 - B. Approaches to Evaluating Evidence
- VIII. Approaches to Implementing Evidence-Based Practice
- IX. Current Perspectives
 - A. Cost Versus Quality
 - B. Individual Differences
 - C. Appropriate Evidence-Based Practice Methods for Population-Centered Nursing Practice
- X. Healthy People 2020 Objectives
- XI. Example of Application of Evidence-Based Practice to Public Health Nursing

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 15.

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Unit 16: Changing Health Behavior Using Health Education with Individuals, Families, and Groups

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe the ways in which people learn.
2. Identify the steps and principles that guide community health education.
3. Discuss the importance of understanding the needs of learners including their cultural background, educational and health literacy level, and their motivation to learn and change behavior.
4. Describe how nurses can work with groups to promote the health of individuals and communities.
5. Explore ethical issues that arise in the practice of health education.

Learning Content:

- I. *Healthy People 2020* Objectives for Health Education
- II. Education, Learning, and Change
- III. How People Learn
 - A. The Nature of Learning
- IV. The Educational Process
 - A. Identify Educational Needs and Develop Goals and Objectives
 - B. Select Appropriate Educational Methods
 - C. Skills of the Effective Educator
 - D. Motivational Interviewing
 - E. Develop Effective Health Education Programs
- V. Educational Issues
 - A. Population Considerations Based on Age and on Cultural and Ethnic Backgrounds
 - B. Use of Technology in Learning
 - C. Barriers to Learning
 - D. Evaluation of the Educational Process
- VI. The Educational Product
 - A. Evaluation of Health and Behavioral Changes
- VII. Groups as a Tool for Health Education
 - A. Group: Definitions and Concepts
 - B. Stages of Group Development
 - C. Choosing Groups for Health Change
 - D. Managing the Community Group
 - E. Implementing the Educational Plan

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 16.

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Unit 17: Building a Culture of Health through Community Health Promotion

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe a culture of health and community promotion in the context of ecologic model and social determinants of health (SDOH).
2. Analyze participatory approaches and the interrelationship among communities, populations, and interprofessional health care providers in the application of community health promotion strategies.
3. Describe evidence-based practice using the integrative model of community health promotion at multiple levels of the client system: individual, family, aggregate, and community.
4. Analyze nursing and interprofessional roles that are essential to build a culture of health through community health promotion.

Learning Content:

- I. Introduction
- II. Historical Perspectives, Definitions, and Methods
 - A. Health and Health Promotion
 - B. Community
- III. Community Health Promotion Models and Frameworks
 - A. Public Health Nursing Community Models and Frameworks
 - B. Health Promotion Models and Frameworks
- IV. The Ecologic Approach to Community Health Promotion
 - A. Ecologic Perspectives on Population Health
 - B. The Social Determinants of Health
- V. An Integrative Model for Community Health Promotion
- VI. Interprofessional Application to Nursing and Public Health
 - A. Community-Based Participatory Research (CBPR)
 - B. Photovoice Method and Projects
- VII. Application of the Integrative Model for Community Health Promotion
 - A. Obesity and the Built Environment

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 17.
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Unit 18: Community as a Client

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Analyze the importance of community assessment in nursing practice.
2. Select and utilize a method and model for assessment of a community.
3. Appraise various online data sources for reliability and accuracy of information.
4. Utilize the nursing process to create a community assessment for a selected community.
5. Interpret concepts basic to community nursing practice: community, community client, community health and partnership for health.
6. Develop a prioritized community problem list and nursing diagnosis, and a care plan for a community.

Learning Content:

- I. Introduction
- II. Community Defined
- III. Community As Client
 - A. Nursing Care of the Community As Client
 - B. Community As Client
 - C. Community Health
 - D. Community Partnerships for Assessment
 - E. The Nurse's Role in the Community
- IV. Community Assessment
 - A. Why Community Assessment?
 - B. Data Sources
 - C. Community Health Assessment Models
- V. Community As Partner
- VI. How to Conduct a Community Assessment
 - A. Getting Started
 - B. Windshield Survey
 - C. Community "Place" and "People" Identified
 - D. The 7 "A's"
 - E. Data Analysis
 - F. Nursing Diagnosis
 - G. Program Planning, Implementation, and Evaluation

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 18.

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Unit 19: Population-Centered Nursing in Rural and Urban Environments

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Compare and contrast definitions of rural and urban.
2. Describe residency as a continuum, ranging from farm residency to core inner city.
3. Compare and contrast the health status of rural and urban populations on select health measures.
4. Analyze barriers to care in health professional shortage areas and for underserved populations.
5. Evaluate issues related to the delivery of public health services for rural underserved populations.
6. Describe characteristics of rural and small-town residency.
7. Examine the role and scope of public health nursing practice in rural and underserved areas.
8. Evaluate two professional-client-community partnership models that can effectively provide a continuum of health care to residents living in an environment with sparse resources.

Learning Content:

- I. Historic Overview
- II. Definition of Terms
 - A. Rurality: A Subjective Concept
- III. Rural-Urban Continuum
- IV. Current Perspectives
 - A. Population Characteristics
 - B. Health Status of Rural Residents
- V. Rural Health Care Delivery Issues and Barriers to Care
- VI. Nursing Care in Rural Environments
 - A. Theory, Research, and Practice
 - B. Research Needs
 - C. Preparing Nurses for Rural Practice Settings
- VII. Future Perspectives
 - A. Scarce Resources and a Comprehensive Health Care Continuum
 - B. Healthy People 2020 National Health Objectives Related to Rural Health
- VIII. Building Professional-Community-Client Partnerships in Rural Settings
 - A. Case Management
 - B. Community-Oriented Primary Health Care

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 19.

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Unit 20: Promoting Health Through Healthy Communities and Cities

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Discuss the history of Health Communities and Cities movement.
2. Discuss the Centers for Disease Control and Prevention Healthy Communities Program.
3. Describe the core concepts and principles that guide the development of a healthy community program.
4. Describe the steps used when working with communities in the Healthy Communities and Cities process.
5. Apply the steps in working with Healthy Communities and Cities to the concepts of health promotion.
6. Explain the role nurses can assume in working with Healthy Communities and Cities.

Learning Content:

- I. History of the Healthy Communities and Cities Movement
- II. Definition of Terms
- III. Assumptions About Community Practice
- IV. Healthy Communities and Cities in the United States
- V. Healthy Communities and Cities Around the World: Selected Examples
- VI. Developing a Healthy Community
- VII. Models for Developing a Healthy Community

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 20.

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Unit 21: The Nurse-led Health Center

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe key characteristics of nurse-led center models.
2. Explain community collaboration.
3. Identify interventions that address Healthy People 2020 goals.
4. Determine the feasibility of establishing and sustaining a nurse-led center.
5. Describe the roles and responsibilities of the advanced practice nurse in a nurse-led center.
6. Discuss the future of population-centered nursing practice, education, and research.

Learning Content:

- I. What Are Nurse-Led Health Centers?
 - A. Overview and Definition
 - B. Nurse-led Models of Care
- II. Types of Nurse-Led Health Centers
 - A. Wellness Centers
 - B. Special Care Centers
 - C. Comprehensive Primary Health Care Centers
- III. The Foundations of Nurse-Led Center Development
 - A. Community Collaboration
 - B. Community Assessment
 - C. Multilevel Interventions
- IV. The Team of a Nurse-Led Center
 - A. Director: Nurse Executive
 - B. Advanced Practice Nurses
 - C. Other Staff
 - D. Educators, Researchers, Students, and Other Members
- V. The Business Side of Nurse-Led Health Centers: Essential Elements
 - A. Start-up and Sustainability
- VI. Evidence-Based Practice
 - A. Evidence-Based Practice Model
 - B. Health Insurance Portability and Accountability Act (HIPAA)
 - C. Outcomes and Quality Indicators
 - D. Quality Improvement
 - E. Technology and Information Systems
- VII. Education and Research
 - A. Program Evaluation
- VIII. Positioning Nurse-Led Health Centers and Advanced Practice Nurses for the Future

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 21.

Discussion Board: Clinical Decision-Making Activities

Unit 22: Case Management

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Define continuity of care, care management, case management, care coordination, transitional care, integrated care, social determinants of health, and advocacy.
2. Describe the scope of practice, roles, and functions of a case manager.
3. Compare and contrast the nursing process with processes of case management and advocacy.
4. Identify methods to manage conflict, as well as the process of achieving collaboration.
5. Define and explain the legal and ethical issues confronting case managers.

Learning Content:

- I. Definitions
- II. Concepts of Case Management
 - A. Case Management and the Nursing Process
 - B. Characteristics and Roles
 - C. Knowledge and Skill Requisites
 - D. Tools of Case Managers
- III. Evidence-Based Examples of Case Management
 - A. Historical Evidence
 - B. Contemporary Evidence
- IV. Essential Skills for Case Managers
 - A. Advocacy
 - B. Conflict Management
 - C. Collaboration
- V. Issues in Case Management
 - A. Legal Issues
 - B. Ethical Issues

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 22.

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Unit 23: Public health Nursing Practice and the Disaster Management Cycle

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Discuss how disasters, both human-made and natural, affect people and their communities.
2. Differentiate disaster management cycle phases to include prevention (mitigation and protection), preparedness, response, and recovery.
3. Examine the nurse's role in the disaster management cycle.
4. Describe competencies for public health nursing practice in disasters.
5. Identify organizations where nurses can volunteer to work in disasters.

Learning Content:

- I. Defining Disasters
- II. Disaster Facts
- III. National Disaster Planning and Response: A Health-Focused Overview
- IV. *Healthy People 2020* Objectives
- V. The Disaster Management Cycle and Nursing Role
 - A. Prevention (Mitigation and Protection)
 - B. Preparedness
 - C. Response
 - D. Recovery
- VI. Future of Disaster Management

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 23.

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Unit 24: Public Health Surveillance and Outbreak Investigation

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Define public health surveillance.
2. Analyze types of surveillance systems.
3. Identify steps in planning, analyzing, interviewing, and evaluating surveillance.
4. Recognize sources of data used when investigating a disease/condition outbreak.
5. Relate the role of the nurse in surveillance and outbreak investigation to the national core competencies for public health nurses.

Learning Content:

- I. Disease Surveillance
 - A. Definitions and Importance
 - B. Uses of Public Health Surveillance
 - C. Purposes of Surveillance
 - D. Collaboration among Partners
 - E. Nurse Competencies
 - F. Data Sources for Surveillance
- II. Notifiable Diseases
 - A. National Notifiable Diseases
 - B. State Notifiable Diseases
- III. Case Definitions
 - A. Criteria
 - B. Case Definition Examples
- IV. Types of Surveillance Systems
 - A. Passive System
 - B. Active System
 - C. Sentinel System
 - D. Special Systems
- V. The Investigation
 - A. Investigation Objectives
 - B. Patterns of Occurrence
 - C. When to Investigate
 - D. Steps in an Investigation
 - E. Displaying of Data

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 24.

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Unit 25: Program Management

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Compare and contrast the program management process and the nursing process.
2. Analyze the application of the program planning process to nursing.
3. Critique a program planning method to use in nursing practice.
4. Analyze the components of program evaluation methods, techniques, and sources.
5. Compare different types of cost studies applied to program management.

Learning Content:

- I. Definitions and Goals
- II. Historical Overview of Health Care Planning and Evaluation
- III. Benefits of Program Planning
- IV. Assessment of Need
 - A. Community Assessment
 - B. Population Needs Assessment
- V. Planning Process
 - A. Basic Program Planning Model Using a Population-Level Example
 - B. Objectives Development for Program Planning and Evaluation
- VI. Program Evaluation
 - A. Benefits of Program Evaluation
 - B. Planning for the Evaluation Process
 - C. Evaluation Process
 - D. Sources of Program Evaluation
 - E. Aspects of Evaluation
- VII. Advanced Planning Methods and Evaluation Models
 - A. Program Planning Method
 - B. Multi-Attribute Utility Technique
 - C. Planning Approach to Community Health (PATCH)
 - D. Assessment Protocol for Excellence in Public Health (APEXPH)
 - E. Mobilizing for Action through Planning and Partnership (MAPP)
 - F. Evaluation Models and Techniques
 - G. Case Register
- VIII. Program Funding

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 25.

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Unit 26: Quality MUnit 26: Quality Management

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Explain the differences in total quality management/continuous quality improvement (TQM/CQI).
2. Evaluate the role of QA/QI in CQI.
3. Analyze the historical development of the quality process in nursing and describe the changes developing under managed care.
4. Evaluate approaches and techniques for implementing CQI and the method of documentation.
5. Plan a model QA/QI program.
6. Identify the purposes for the types of records kept in community and public health agencies.

Learning Content:

- I. Definitions and Goals
- II. Historical Development
- III. Approaches to Quality Improvement
 - A. General Approaches
 - B. Specific Approaches
- IV. TQM/CQI in Community and Public Health Settings
 - A. Using QA/QI in CQI
 - B. Traditional Quality Assurance
- V. Client Satisfaction
 - A. Malpractice Litigation
- VI. Model CQI Program
 - A. Structure
 - B. Process
 - C. Outcome
 - D. Evaluation, Interpretation, and Action
- VII. Records
 - A. Community and Public Health Agency Records

Learning Activities:

Read:

Stanhope, M., & Lancaster, J. (2020). Chapter 26.

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Unit 27: Working with Families in the Community for Healthy Outcomes

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Explain the multiple ways public health nurses work with families and communities.
2. Identify challenges to working with families in the community.
3. Describe family function and structure.
4. Describe family demographic trends and demographic changes that affect the health of families.
5. Compare and contrast three social science theoretical frameworks nurses use when working with the family in the community.
6. Work with families using a strength-based approach to assess, develop, and evaluate family action plans.

Learning Content:

I. Challenges for Nurses Working with Families in the Community

- A. Definition of Family
- B. Transitions of Care
- C. Uninsured, Underinsured, and Limited Services

II. Family Functions and Structures

III. Family Demographics

- A. Living Arrangements
- B. Marriage, Divorce, and Cohabitation
- C. Births
- D. Parenting
- E. Immigration
- F. Family Caregivers

IV. Family Health

V. Four Approaches to Family Nursing

- A. Family As Context
- B. Family As Client
- C. Family As a System
- D. Family As a Component of Society

VI. Theories for Working with Families in the Community

- A. Family Systems Theory
- B. Family Developmental and Life Cycle Theory
- C. Bioecological Systems Theory

VII. Working with Families for Healthy Outcomes

- A. Pre-encounter Data Collection
- B. Determine Where to Meet the Family
- C. Making an Appointment with the Family
- D. Planning for Your Own Safety
- E. Interviewing the Family: Defining the Problem
- F. Family Assessment Instruments
- G. Family Health Literacy
- H. Designing Family Interventions

I. Evaluation of the Plan

VIII. Social and Family Policy Challenges

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 27.

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Unit 28: Family Health Risks

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Evaluate the various approaches to defining and conceptualizing family health.
2. Analyze the major risks to family health.
3. Analyze the interrelationships among individual health, family health, and community health.
4. Explain the relevance of knowledge about family structures, roles, and functions for family-focused nursing in the community.
5. Discuss the implications of policy and policy decisions, at all governmental levels, on families.
6. Explain the application of the nursing process (assessment, planning, implementation, evaluation) to reducing family health risks and promoting family health.

Learning Content:

- I. Early Approaches to Family Health Risks
 - A. Health of Families
 - B. Health of the Nation
- II. Concepts in Family Health Risk
 - A. Family Health
 - B. Health Risk
 - C. Health Risk Appraisal
 - D. Health Risk Reduction
 - E. Family Crisis
- III. Major Family Health Risks and Nursing Interventions
 - Family Health Risk Appraisal
- IV. Nursing Approaches to Family Health Risk Reduction
 - A. Home Visits
 - B. Contracting With Families
 - C. Empowering Families
- V. Community Resources
 - A. Telehomecare
 - B. Family Policy
 - C. Vulnerable Populations: LGBTQ Families at Risk

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 28.

Discussion Board: Clinical Decision-Making Activities

Unit 29: Child and Adolescent Health

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe significant physical and psychosocial developmental factors characteristic of the child and adolescent population.
2. Examine the role of the nurse and discuss appropriate nursing interventions that promote and maintain the health of children and adolescents as individuals, as members of their family, and as members of the community.
3. Discuss the built environment and how it relates to major issues of children and adolescents.
4. Explain the current status of children and their physical, emotional, behavioral, and environmental health issues.
5. Differentiate between the models for delivery of health care to the pediatric populations in the community and other settings.

Learning Content:

- I. Status of Children
 - A. Poverty Status
 - B. Immigrant Children
 - C. Access to Care
 - D. Infant Mortality
 - E. Risk-Taking Behaviors
- II. Child Development
 - A. Growth and Development
 - B. Developmental Theories
 - C. Developmental Screening
- III. Immunizations
 - A. Barriers
 - B. Immunization Theory
 - C. Recommendations
 - D. Contraindications
 - E. Legislation
- IV. The Built Environment
 - A. Obesity
 - B. Built Food Environments
 - C. Obesity Prevention
 - D. Nutrition Assessment
 - E. Physical Activity
 - F. Schools
 - G. Media
 - H. Injuries and Accidents
- V. Health Problems of Childhood
 - A. Acute Illnesses
 - B. SIDS/SUIDS
 - C. Oral Health
 - D. Chronic Health Conditions

E. Mental Health

F. Environmental Health

G. Environmental Tobacco Smoke

VI. Models for Health Care Delivery to Children and Adolescents

A. Family-Centered Medical Home

B. Motivational Interviewing

VII. Role of the Population-Focused Nurse in Child and Adolescent Health

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 29.

Discussion Board: Clinical Decision-Making Activities

Unit 30: Major Health Issues and Chronic Disease Management of Adults Across the Lifespan

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Define terms commonly used in the care of adults.
2. Describe historical and current perspectives of adult health and health policy.
3. Discuss sources of population-based public health data and health status indicators about adults to be used to align community resources to support adults with chronic illnesses.
4. Use appropriate assessment tools and development strategies to care for adults across the life span.
5. Discuss the concepts of self-management and the implementation of the Chronic Care Model to support adults with chronic illness.
6. Explain the dynamic forces that contribute to shared and gender specific diseases, health disparities, cultural diversity, and the role of social and behavioral factors that contribute to culturally competent care of adults in their communities.

Learning Content:

- I. Historical Perspectives on Adult Men and Women's Health
- II. Health Policy and Legislation
 - A. Ethical and Legal Issues and Legislation for Older Adults
 - B. Environmental Impact
- III. Health Status Indicators
 - A. Mortality
 - B. Morbidity
- IV. Adult Health Concerns
 - A. Chronic Disease
 - B. Cardiovascular Disease
 - C. Hypertension
 - D. Stroke
 - E. Diabetes
 - F. Mental Health
 - G. Cancer
 - H. STDs/HIV/AIDS
 - I. Weight Control
- V. Women's Health Concerns
 - A. Reproductive Health
 - B. Gestational Diabetes
 - C. Menopause
 - D. Breast Cancer
 - E. Osteoporosis
- VI. Men's Health Concerns
 - A. Cancers Unique to Men
 - B. Depression
 - C. Erectile Dysfunction
- VII. Health Disparities Among Special Groups of Adults
 - A. Adults of Color

- B. Incarcerated Adults
 - C. Lesbian/Gay/Bisexual Adults
 - D. Adults with Physical and Mental Disabilities
 - E. Impoverished and Uninsured Adults
 - F. Frail Elderly
- VIII. Community-Based Models for Care of Adults
- A. Nursing Roles
 - B. Community Care Settings

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 30.

Discussion Board: Clinical Decision-Making Activities

Unit 31: Disability Health Care Across the Life Span

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Define terms related to disability.
2. Discuss implications of developmental disability, physical disability, or chronic illness.
3. Identify the conditions that may contribute to disability.
4. Discuss the effects of being disabled on the individual, the family, and the community.
5. Describe the implications of being disabled for selected (low-income) populations.
6. Discuss selected issues for those who are disabled (abuse, health promotion).
7. Discuss the objectives of Healthy People 2020 as they relate to disability.
8. Examine the nurse's role in caring for people who are disabled.

Learning Content:

- I. Understanding Disabilities
 - A. Models of Disability
 - B. Disability Defined
 - C. Census Determination of Disability
 - D. Social Security Disability
 - E. Americans with Disabilities Act
 - F. Functional Disability
 - G. Additional Definitions
- II. Scope of the Problem
 - A. Number of Disabled Americans
 - B. Number of Disabled Worldwide
 - C. Burden of Chronic Disease
 - D. Additional Causes of Disability
 - E. Childhood Disability
 - F. Mental Illness
- III. The Effects of Disabilities
 - A. Effects on the Individual
 - B. Effects on the Family
 - C. Effects on the Community
- IV. Special Populations
 - A. Low-Income Populations
- V. Selected Issues
 - A. Abuse and Neglect
 - B. Health Promotion
 - C. *Healthy People 2020* Objectives
- VI. Role of the Nurse
- VII. Legislation
 - A. Basic Rights Under IDEA

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 31.

Discussion Board: Clinical Decision-Making Activities

Unit 32: Vulnerability and Vulnerable Populations

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe population groups who might be considered vulnerable.
2. Identify the ways in which these populations often have health disparities compared with the general population.
3. Analyze trends that have influenced both the development of vulnerability among certain population groups and social attitudes toward vulnerability.
4. Analyze the effects of public policies on vulnerable populations and on reducing health disparities experienced by these populations.
5. Examine the multiple individual and social factors that contribute to vulnerability.
6. Evaluate strategies that nurses can use to improve the health status, and eliminate health disparities, of vulnerable populations including governmental, community, and private programs.

Learning Content:

- I. Vulnerability: Definition, Risk Factors, and Health Disparities
- II. Factors Contributing to Vulnerability
 - A. Social Determinants of Health
 - B. Health Status
- III. Outcomes of Vulnerability
- IV. Public Policies Affecting Vulnerable Populations
- V. Nursing Approaches to Care in the Community
 - A. Levels of Prevention
 - B. Assessment Issues
- VI. Planning and Implementing Care for Vulnerable Populations

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 32.

Discussion Board: Clinical Decision-Making Activities

Unit 33: Poverty and Homelessness

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Analyze the concept of poverty.
2. Discuss how nurses view and understand poverty, homelessness, and health.
3. Describe the social, political, cultural, and environmental factors that influence poverty and homelessness.
4. Discuss the effects of poverty on the health and well-being of individuals, families, and communities.
5. Analyze the concept of homelessness.
6. Discuss the effects of homelessness on the health and well-being of individuals, families, and communities.
7. Discuss nursing interventions for poor and homeless individuals.

Learning Content:

- I. Concept of Poverty
 - A. Historical Views of Poverty
 - B. Cultural Attitudes and the Media's Influence
- II. Defining and Understanding Poverty
 - A. Social and Cultural Definitions of Poverty
 - B. Political Dimensions and Causes of Poverty
- III. Poverty and Health: Effects across the Life Span
 - A. Poverty among Women
 - B. Children and Poverty
 - C. Noncustodial Parents
 - D. Older Adults and Poverty
 - E. The Community and Poverty
- IV. Understanding the Concept of Homelessness
 - A. Perceptions of Homelessness
 - B. Homelessness in the United States
 - C. Why Are People Homeless?
- V. Effects of Homelessness on Health
 - A. Homelessness and At-Risk Populations
 - B. Federal Programs for the Homeless
- VI. Role of the Nurse

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 33.

Discussion Board: Clinical Decision-Making Activities

Unit 34: Migrant Health Issues

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Define the migrant farmworker and seasonal farmworker and discuss the lifestyle and work environments that contribute to their health status.
2. Discuss the difficulties with obtaining epidemiologic and health data on this population.
3. Describe occupational and common health problems of migrant farmworkers and their families and the barriers in securing health care.
4. Evaluate programs to determine effectiveness with encouraging health-seeking and health-promoting behaviors among migrant farmworkers and their families.
5. Analyze the role of the nurse in planning and providing culturally appropriate care to migrant farmworkers and their families.
6. Advocate for legislation and policy that would improve the lives and working conditions of migrant farmworkers and their access to health care services.

Learning Content:

- I. Migrant Lifestyle
 - A. Housing
- II. Health and Health Care
 - A. Access to Health Care
- III. Occupational and Environmental Health Problems
 - A. Pesticide Exposure
- IV. Common Health Problems
 - A. Specific Health Problems
- V. Children and Youth
- VI. Cultural Considerations in Migrant Health Care
 - A. Nurse-Client Relationship
 - B. Health Values
 - C. Health Beliefs and Practices
- VII. Health Promotion and Illness Prevention
- VIII. Role of the Nurse

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 34.

Discussion Board: Clinical Decision-Making Activities

Unit 36: Mental Health Issues

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe the history of community mental health and make predictions about the future.
2. Discuss the prevalence of mental illness in the United States and the world.
3. Describe essential mental health services and corresponding national objectives for improving mental health.
4. Evaluate standards, models, concepts, strategies, and research findings for use in the community mental health nursing practice to improve community mental health.
5. Describe the role of the community mental health nurse with individuals and with groups at risk for psychiatric mental health problems.
6. Apply the nursing process in community work with clients diagnosed with psychiatric disorders, families at risk for mental health problems, and vulnerable populations.

Learning Content:

- I. Scope of Mental Illness in the United States
 - A. Consumer Advocacy
 - B. Neurobiology of Mental Illness
- II. Systems of Community Mental Health Care
 - A. Managed Care
 - B. Patient Protection and Affordable Health Care Act
 - C. Mental Health Services
- III. Evolution of Community Mental Health Care
 - A. Historical Perspectives
- IV. Deinstitutionalization
 - A. Civil Rights Legislation for Persons with Mental Disorders
 - B. Advocacy Efforts
- V. Conceptual Frameworks for Community Mental Health
 - A. Levels of Prevention
- VI. Role of the Nurse in Community Mental Health
 - A. Clinician
 - B. Educator
 - C. Coordinator
- VII. Current and Future Perspectives in Mental Health Care
- VIII. National Objectives for Mental Health Services
 - A. Children and Adolescents
 - B. Adults
 - C. Adults with Serious Mental Illness
 - D. Older Adults
 - E. Cultural Diversity

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 36.

Discussion Board: Clinical Decision-Making Activities

Unit 37: Alcohol, Tobacco, and Other Drug Problems

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe personal attitudes toward alcohol, tobacco, and other drug problems.
2. Differentiate among these terms: substance use, abuse, dependence, and addiction
3. Discuss differences among major psychoactive drug categories of depressants, stimulants, marijuana, hallucinogens, and inhalants.
4. Explain the role of the nurse in primary, secondary, and tertiary prevention of alcohol, tobacco, and other drug problems as it relates to individual clients, their families, and special populations.

Learning Content:

I. Alcohol, Tobacco, and Other Drug Problems in Perspective

- A. Historical Overview
- B. Attitudes and Myths
- C. Paradigm Shift
- D. Definitions

II. Psychoactive Drugs

- A. Alcohol
- B. Tobacco
- C. Marijuana
- D. Illicit Prescription Drugs

III. Predisposing/Contributing Factors

- A. Set
- B. Setting
- C. Biopsychosocial Model of Addiction

IV. Primary Prevention and the Role of the Nurse

- A. Promotion of Healthy Lifestyles and Resiliency Factors
- B. Drug Education

V. Secondary Prevention and the Role of the Nurse

- A. Assessing for Alcohol, Tobacco, and Other Drug Problems
- B. Drug Testing
- C. High-Risk Groups
- D. Codependency and Family Involvement

VI. Tertiary Prevention and the Role of the Nurse

- A. Detoxification
- B. Addiction Treatment
- C. Smoking Cessation Programs
- D. Support Groups

E. Nurse's Role

VII. Outcomes

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 37.

Discussion Board: Clinical Decision-Making Activities

Unit 38: Violence and Human Abuse

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Discuss the scope of the problem of violence in American communities.
2. Examine at least three factors existing in most communities that influence violence and human abuse.
3. Define the four general types of child abuse: neglect, physical, emotional, and sexual.
4. Discuss elder abuse as a crucial community health problem.
5. Discuss principles of nursing intervention with violent families.
6. Describe specific nursing interventions with battered women.

Learning Content:

I. Social and Community Factors Influencing Violence

- A. Work
- B. Education
- C. Media
- D. Organized Religion
- E. Population
- F. Community Facilities

II. Violence against Individuals or Oneself

- A. Homicide
- B. Assault
- C. Rape
- D. Suicide

III. Family Violence and Abuse

- A. Development of Abusive Patterns
- B. Types of Intimate Partner and Family Violence

IV. Nursing Interventions

- A. Primary Prevention
- B. Secondary Prevention
- C. Tertiary Prevention: Therapeutic Intervention with Abusive Families

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 38.

Discussion Board: Clinical Decision-Making Activities

Unit 39: The Advanced Practice Nurse

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe the history of community mental health and make predictions about the future.
2. Discuss the prevalence of mental illness in the United States and the world.
3. Describe essential mental health services and corresponding national objectives for improving mental health.
4. Evaluate standards, models, concepts, strategies, and research findings for use in the community mental health nursing practice to improve community mental health.
5. Describe the role of the community mental health nurse with individuals and with groups at risk for psychiatric mental health problems.
6. Apply the nursing process in community work with clients diagnosed with psychiatric disorders, families at risk for mental health problems, and vulnerable populations.

Learning Content:

- I. Scope of Mental Illness in the United States
 - A. Consumer Advocacy
 - B. Neurobiology of Mental Illness
- II. Systems of Community Mental Health Care
 - A. Managed Care
 - B. Patient Protection and Affordable Health Care Act
 - C. Mental Health Services
- III. Evolution of Community Mental Health Care
 - A. Historical Perspectives
- IV. Deinstitutionalization
 - A. Civil Rights Legislation for Persons with Mental Disorders
 - B. Advocacy Efforts
- V. Conceptual Frameworks for Community Mental Health
 - A. Levels of Prevention
- VI. Role of the Nurse in Community Mental Health
 - A. Clinician
 - B. Educator
 - C. Coordinator
- VII. Current and Future Perspectives in Mental Health Care
- VIII. National Objectives for Mental Health Services
 - A. Children and Adolescents
 - B. Adults
 - C. Adults with Serious Mental Illness
 - D. Older Adults
 - E. Cultural Diversity

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 36.

Discussion Board: Clinical Decision-Making Activities

Unit 40: The Nurse Leader in the Community

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Explain why nurses need effective leadership, management, and consultation skills in today's public health care environment.
2. Explore what is meant by partnership and interprofessional practice and describe how these concepts are related to nursing leadership, management, and consultation.
3. Analyze what is meant by systems thinking in community-based and public health settings.
4. Describe the major competencies required to be effective as a nurse leaders, manager, and consultant in community-based and public health settings.
5. Examine nursing leadership strategies to enhance client safety and reduce health care errors in community settings.
6. Explain how nurses provide leadership in care coordination in the community.

Learning Content:

- I. Major Trends and Issues
- II. Definitions
- III. Leadership and Management Applied to Population-Focused Nursing
 - A. Goals
 - B. Theories of Leadership and Management
 - C. Nurse Leader and Manager Roles
- IV. Consultation
 - A. Goal
 - B. Theories of Consultation
 - C. Consultation Contract
 - D. Nurse Consultant Role
- V. Competencies for Nurse Leaders
 - A. Leadership Competencies
 - B. Interpersonal Competencies
 - C. Power Dynamics and Conflict Resolution
 - D. Organizational Competencies
 - E. Fiscal Competencies
 - F. Analytical and Information Competencies
- VI. Future of Nursing Leadership

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 40.

Discussion Board: Clinical Decision-Making Activities

Unit 41: The Nurse in Home Health, Palliative Care, and Hospice

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Compare different practice models for home and community-based services.
2. Summarize the basic roles and responsibilities of home health, palliative, and hospice nurses.
3. Explain the professional standards and educational requirements for nurses in home health, palliative care, and hospice.
4. Describe the three components of the Omaha System.
5. Analyze how nurses in home health, palliative care, and hospice use best practices, evidence-based practice, and quality improvement strategies to improve the care they provide.
6. Cite examples of trends and opportunities in home health, palliative care, and hospice involving technology, informatics, and telehealth.

Learning Content:

- I. Evolution of Home Health, Palliative Care, and Hospice
- II. Description of Practice Models
 - A. Population-Focused Home Care
 - B. Transitional Care
 - C. Home-Based Primary Care
 - D. Home Health
 - E. Hospice and Palliative Care
- III. Scope and Standards of Practice
 - A. Omaha System
 - B. Description of the Omaha System
- IV. Practice Guidelines
 - A. Clinical Example from Community-Focused Practice
- V. Practice Linkages
 - A. Outcome and Assessment Information
 - B. Medication Management
 - C. Infection Prevention
- VI. Accountability and Quality Management
 - A. Evidence-Based Quality/Performance Improvement
 - B. Outcome-Based Quality Improvement
 - C. Accreditation
- VII. Professional Development and Collaboration
 - A. Education, Certification, and Roles
 - B. Interprofessional Collaboration
- VIII. Legal, Ethical, and Financial Issues
- IX. Trends and Opportunities
 - A. National Health Objectives
 - B. Organizational and Professional Resources
 - C. Technology, Informatics, and Telehealth
- X. Summary

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 41.
Discussion Board: Clinical Decision-Making Activities

Unit 42: The Nurse in Schools

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Discuss professional standards expected of school nurses.
2. Differentiate between the many roles and functions of school nurses.
3. Describe the different variations of school health services and coordinated school health programs.
4. Discuss common health problems of children and adolescents seen in the school setting.
5. Analyze the nursing care given in schools in terms of the primary, secondary, and tertiary levels of preparation.
6. Anticipate future trends in school nursing.

Learning Content:

- I. History of School Nursing
 - A. The 1800s and Beyond
 - B. Federal Legislation in the 1970s, 1980s, 1990s, and 2000s
- II. Standards of Practice for School Nurses
- III. Educational Credentials of School Nurses
- IV. Roles and Functions of School Nurses
 - A. School Nurse Roles
- V. School Health Services
 - A. Federal School Health Programs
 - B. School Health Policies and Practices Study 2012
 - C. School-Based Health Programs
- VI. School Nurses and *Healthy People 2020*
 - A. The Levels of Prevention in Schools
 - B. Primary Prevention in Schools
 - C. Secondary Prevention in Schools
 - D. Tertiary Prevention in Schools
- VII. Controversies in School Nursing
- VIII. Ethics in School Nursing
- IX. Future Trends in School Nursing

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 42.

Discussion Board: Clinical Decision-Making Activities

Unit 43: The Nurse in Occupational Health

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe the nursing role in occupational health.
2. Discuss current trends in the U.S. workforce.
3. Use the epidemiologic model to explain work-health interactions and give examples of work-related illness, injuries, and hazards.
4. Complete an occupational health history.
5. Differentiate between the functions of OSHA and NIOSH.
6. Explain an effective disaster plan in occupational health.

Learning Content:

- I. Definition and Scope of Occupational Health Nursing
- II. History and Evolution of Occupational Health Nursing
- III. Roles and Professionalism in Occupational Health Nursing
- IV. Workers as a Population Aggregate
 - A. Characteristics of the Workforce
 - B. Characteristics of Work
- V. Work–Health Interactions
- VI. Application of the Epidemiologic Model
 - A. Host
 - B. Agent
 - C. Environment
- VII. Organizational and Public Efforts to Promote Worker Health and Safety
 - A. On-Site Occupational Health and Safety Programs
- VIII. Nursing Care of Working Populations
 - A. Worker Assessment
 - B. Workplace Assessment
- IX. *Healthy People 2020* Document Related to Occupational Health
- X. Legislation Related to Occupational Health

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 43.

Discussion Board: Clinical Decision-Making Activities

Unit 44: Forensic Nursing in the Community

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Describe the specialized competencies and skills of the forensic nurse within the nursing process.
2. Discuss the relationship of the forensic nurse with public health professionals in addressing injury as a public health concern.
3. List the health risks that result from incidents of injury.
4. Identify how forensic nurses deal with injuries in the three levels of prevention.
5. Discuss the health disparities that contribute to the occurrence and poor outcomes in marginalized groups who experience injury.
6. Explain the contribution of the theoretical underpinnings to current models of forensic nursing practice.
7. Identify client population and clinical arenas in the community where forensic nurses practice.
8. Define the key terms and concepts within forensic nursing theory.
9. Identify professionals who commonly work in collaboration with the forensic nurse in addressing injury care and prevention.

Learning Content:

- I. Perspectives on Forensics and Forensic Nursing
- II. Injury Prevention
- III. *Healthy People 2020* Goals, Prevention, and Forensic Nursing
- IV. Forensic Nursing As a Specialty Area That Provides Care in the Community
 - A. History of Forensic Nursing
 - B. Educational Preparation
 - C. Theoretical Foundations of Forensic Nursing
 - D. Key Concepts in Forensic Nursing
 - E. Scope and Standards of Practice
 - V. Current Perspectives
 - A. Evidence-based Practice and Research
 - B. Certification
 - VI. Ethical Issues
 - VII. Future Perspectives

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 44.

Discussion Board: Clinical Decision-Making Activities

Unit 45: The Nurse in the Faith Community

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Define faith community nursing and wholistic health promotion.
2. Examine the historical roots of nursing and healing ministries as well as professional issues and future development of faith community nursing.
3. Relate models of faith community nursing to the scope and standards of practice for faith community nursing.
4. Develop awareness of the nurse's role within faith communities for spiritual care, health promotion, and disease prevention.
5. Differentiate between spirituality and religiosity.
6. Use the nursing process in a faith community to assess, implement, and evaluate programs for healthy congregations using Healthy People 2020 leading health indicators.

Learning Content:

- I. Introduction
- II. Rationale for Faith Community Nursing As Viable Community Health Model
- III. Definitions in Faith Community Nursing
- IV. Historical Perspectives
 - A. Faith Communities
 - B. Parish/Faith Community Nursing
- V. Faith Community Nursing Practice
 - A. Profile of the Faith Community Nurse
 - B. Characteristics of Faith Community Nurse Practice
 - C. Faith Community Nurse Interventions and Programs
 - D. Faith Community Nurse Education
- VI. Models of Faith Community Nursing
 - A. Holistic Health Care
- VII. Issues in Faith Community Nursing Practice
 - A. Professional Issues
 - B. Documentation Issues
 - C. Legal Issues
 - D. Financial Issues
 - E. Future Growth
- VIII. National Health Objectives and Faith Communities
 - A. Faith Community Nursing Certification
- IX. Conclusion

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2016). Chapter 45.

Discussion Board: Clinical Decision-Making Activities

Unit 46: Public Health Nursing at Local, State, and National Levels

Unit Student Learning Outcomes:

Upon completion of this unit, the student will be expected to:

1. Define public health, public health system, public health nursing, and local, state, and national roles.
2. Identify trends in public health nursing.
3. Provide examples of public health nursing roles.
4. Differentiate the emerging public health issues that specifically affect public health nursing.
5. Describe the principles of partnerships.
6. Identify educational preparation of public health nurses and competencies necessary to practice.

Learning Content:

- I. Roles of Local, State, and Federal Public Health Agencies
- II. History and Trends in Public Health
- III. Scope, Standards, and Roles of Public Health Nursing
- IV. Issues and Trends in Public Health Nursing
- V. Models of Public Health Nursing Practice
- VI. Education and Knowledge Requirements for Public Health Nurses
- VII. National Health Objectives
- VIII. Functions of Public Health Nurses

Learning Activities:

Read: Stanhope, M., & Lancaster, J. (2020). Chapter 45.

Discussion Board: Clinical Decision-Making Activities

Course Calendar
All weeks begin on Monday and end on Sunday

Week	Reading	Assignment due
Week 1 01/16-01/21	Ch 1, & 4	Discussion board. Primary post due by Thursday 2359. Discussion replies to two of your peers due by Sunday by 2359
Week 2 01/22-01/28	Ch 2 & 3	Discussion board. Primary post due by Thursday by 2359. Discussion replies to two of your peers due by Sunday by 2359. Quiz unit 3 due by Sunday by 2359
Week 3 01/29-02/04	Ch 6 & 13	Discussion board. Primary post due by Thursday by 2359. Discussion replies to two of your peers due by Sunday by 2359 Case study (1) due by Sunday by 2359 Welcome to Shadow health assignment by Sunday 2355
Week 4 2/05-02/11	Ch 10 & 11	Discussion board. Primary post due by Thursday by 2359. Discussion replies to two of your peers due by Sunday by 2359 Quiz unit 10 due by Sunday by 2359 Shadow health community assessment by Sunday 2355
Week 5 02/12-02/18	Ch 14 & 15	Discussion board. Primary post due by Thursday by 2359. Discussion replies to two of your peers/faculty due by Sunday by 2359 Case study (2) due by Sunday by 2359
Week 6 02/19-02/25		Windshield Survey due by Sunday 2359

Week 7 02/26-03/03	Ch 20 & 22	Discussion board. Primary post due by Thursday by 2359. Discussion replies to two of your peers/faculty due by Sunday by 2359. Case study (3) due by Sunday 2359 Shadow health home health visit by Sunday 2355
Week 8 03/04-03/10	Ch 17, 18, 19, 25	Discussion board. Primary post due by Thursday 2359. Discussion replies to two of your peers due by Sunday by 2359 Quiz unit 17 due by Sunday 2359 Shadow health HIV diagnosis with contract tracing by Sunday 2355
Week 9 03/11-03/17	Spring Break College closed	
Week 10 03/18-03/24	Ch 26,27, 28 & 33	Discussion board. Primary post due by Thursday 2359. Discussion replies to two of your peers due by Sunday by 2359 Shadow Health comprehensive assessment with barriers to care by Sunday 2355
Week 11 03/25-03/31	Ch 29 & 30	Discussion board. Primary post due by Thursday 2359. Discussion replies to two of your peers due by Sunday by 2359 Case study (4) due by Sunday 2359.
Week 12 04/01-04/07	Ch 34 & 41	Discussion board. Primary post due by Thursday 2359. Discussion replies to two of your peers due by Sunday by 2359.

		<p>Case study (5) due by Sunday 2359.</p> <p>Shadow health community care plan environmental exposure by Sunday 2355</p>
Week 13 04/08-04/14	Ch 35 & 36	<p>Discussion board. Primary post due by Thursday 2359.</p> <p>Discussion replies to peers due by Sunday 2359.</p> <p>Quiz unit 34 due by Sunday 2359</p>
Week 14 04/15-04/21	Ch 39 & 44	<p>Community Health Care Plan of Care/Summary Assignment*</p>
Week 15 04/29-05/05	Ch 43, 45 & 46	<p>Discussion board. Primary post due by Thursday 2359.</p> <p>Discussion replies to two of your peers due by Sunday by 2359</p>
Week 16 05/06-05/10	Course Evaluations	<p>Quiz unit 39 due by Wednesday 2359</p> <p>Course evaluations due by 05/09/23</p>

Appendix A

Community Health Care Plan and Summary Assignment

The community health project includes the community care plan and a project summary. The student will conduct a windshield survey of a selected community and research local government websites to confirm data about the selected community and choose a specific social determinant that pertains to that community. The student will utilize the Future of Nursing: Campaign for Action Equity Toolkit (Campaign for Action, 2020) to create a plan of care including assessment, diagnosis, plan, implementation, and will provide an evaluation the specified social determinant in the community. The summary will include a minimum of three evidence-based references regarding care given for the social determinant by multiple disciplines. Also, the student will summarize three levels of prevention regarding the social determinant.

Community Health Project and Summary

Criteria	Meets Expectations 12-13	Needs Improvement 8-9	Does Not Meet Expectations 0-4
Summary: The student summarizes the data collected from the windshield survey about their selected community and identifies a social determinant.	Summary of the windshield survey supports the identified social determinant. Cited data supports social determinant	Summary supports social determinant identified but lacks cited data to support social determinant.	Summary does not support selected social determinant.
Social determinant: The social determinant is defined and is supported by a minimum of three evidence-based references regarding care given for the social determinant by multiple disciplines.	Social determinant is defined and supported by three evidenced based references.	Social determinant is defined and supported by three evidenced based references.	Social determinant is defined and supported by three evidenced based references.
Health impact of social determinant: (Cited references) The summary identifies health impact of social determinant and addresses three levels	Social determinant is defined and supported by three evidenced based references.	Social determinant is defined and supported by three evidenced based references.	Questions remain about the health impact and or levels of prevention

of prevention (Primary secondary and tertiary) regarding the social determinant.			
Plan of Care Utilizing the Campaign for Action Equity Toolkit			
Assessment: Community assessment: (Cited references) Identifies community challenges and resources (These may include organizations, people, places, associations, coalitions, and institutions) (Provider of Patient-Centered Care)	Community challenges and resources are identified and supported by cited data.	Community challenges and resources are identified but lack cited data to support	Questions remain about the health impact and or levels of prevention
Planning: Identifying community Partners: Identify potential partners in the community who you would request to form a coalition. Provide a rationale why they would be a key stakeholder.	Community partners are identified rationale supports why they would be a key stakeholder for identified social determinant.	Community partners are identified but rationale does not support why they would be a key stakeholder.	Questions remain about how community partners.
Identification of three smart goals based on social determinant: Create three SMART goals utilizing evidence-based data that will support the coalition's efforts to reduce the risk of the social determinant. (Provider of Patient-Centered Care).	Three smart goals are identified but lacks support of evidenced based data.	Three smart goals are identified but lacks support of evidenced based data.	Smart goals are not related to the social determinant/and or lack data to support
Action/implementation: Patient Safety Advocate) The student identifies two	Identifies 2 interventions for each goal rationale is given along actions by coalition	Identifies 2 interventions for each smart goal but lacks rationale/or actions by coalition	Identifies 2 interventions for each smart goal but lacks rationales and actions by

<p>interventions/actions for each of the three goals implements: What actions would your coalition implement to achieve your SMART goals and why? (Provider of Patient-Centered Care)</p>	<p>(partners)</p>	<p>(partners)</p>	<p>coalition (partners)</p>
<p>Projected evaluation of goals: What policy suggestions could you make as a result of your effort? Evaluate Impact: What health outcomes and behaviors are projected to change as a result of the work? (Provider of Patient-Centered Care)</p>	<p>Policy is suggested but lacks health outcomes or behaviors expected to change are projected.</p>	<p>Policy is suggested but lacks health outcomes or behaviors expected to change are projected.</p>	<p>Policy is suggested, but lacks health outcomes and behaviors expected to change are</p>

