

2013

# 753-P Community Nursing and Public Health Policy Practicum

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**Xavier University**  
**College of Social Sciences, Health and Education**  
**School of Nursing; 2013 Fall Semester**

**Course Number and Title:** NURS 753 - Community Nursing and Public Health Policy Practicum

**Number of Credits:** Two semester credits

**Time/Location:** 8 clock hours per week for the semester

**Clinical:** Times and locations as designated by faculty and community clinical sites on Wednesday (5 hours /week; 5 x 15 weeks = 75 hours)

**Seminar:** Thursday 9:00AM to 12:00 PM; The Gallagher Student Center Auditorium; conference/guest lectures/fieldtrips/small group work/ (3 hours/ week x 15 weeks = 45 hours)

**Prerequisite(s):** All NURS 500 and 600 level practicum courses.

**Co-requisite(s):** NURS 752 Community Nursing/Public Health Policy

**Course Description:**

NURS 753 Community Nursing/Public Health Policy Practicum: Provides opportunities to assess and analyze the needs and strengths of communities and populations using various community/assessment Frameworks/Models. The partnership role of the community as client/teacher with the holistic nurse is emphasized. The focus is on primary prevention and culturally competent health care management using evidence-based practices to achieve public health policy goals.

**Course Objectives:**

1. Examine interrelationships of macro and micro health systems as related to the role of Community/Public health nurses.
2. Use epidemiologic methods to describe the state of health of populations or a community.
3. Delineate activities for increased nurse involvement in the policy process.
4. Enact the role of a community health nurse in selected settings.
5. Demonstrate application of the standards of Public Health Nursing Practice in caring for populations.
6. Employ a comparative model to study an international program or a global health policy.

**Faculty:**

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**Required Text:**

Harkness, G.A. & DeMarco, R.F. (2012). *Community and public health nursing: Evidence for practice*. Philadelphia, PA: Wolters Kluwer/Lippincott Williams and Wilkins.

ISBN: 978-0-7817-5851-2

Porche, D. (2012). *Health Policy Application for Nurses and Other Healthcare Professionals*.

Sudbury, MA: Jones & Bartlett Learning. ISBN: 978-0-7637-8313-6

**Additional Resources:**

Chapters and articles on Blackboard

**Methods of Instruction:**

VanKuiken\_753 plus others.doc

Lecture, Field Trips, Small group activities, Clinical experience, Web Based Applications

**Attendance:**

Clinical practice is an integral part of professional nursing education. The student is expected to be at the clinical site at the agreed upon time. In this course any missed clinical hours must be rescheduled. Should circumstances prevent a student from attending clinical, it will be the responsibility of the student to inform the instructor and the clinical agency prior to the experience.

**Attendance Policy for Seminar:** Attendance is mandatory and students are expected to be in seminar at 9 am. Student will have 1 point deducted from the final grade for each 15 minutes tardy. Each student is allotted one “grace” absence. Missed seminar days will result in losing grade point *from the final grade for class* as follows:

3 points for 2<sup>nd</sup> absence

6 points for 3<sup>rd</sup> absence

9 points for 4<sup>th</sup> absence

**Professional Behavior:**

Refer to Student Handbook. Thursday Seminar will be held in Gallagher Student Center Theatre. No food or drink is allowed within the theatre.

Seminar speakers donate their time and expertise to our students. Professional attentiveness is expected. Computers will not be allowed during speakers for seminar, with the exception of week one and reviewing materials for screening in the CPS schools.

**Written Work:**

All written work must be emailed by the due date and time selected by the clinical faculty member. Any late work will result in 5 points per day being deducted from the original grade.

**Evaluation Methods:**

**Grade Points**

Clinical Evaluation based on preceptor feedback	10%
Community Assessment: [group activity] See Rubric	30%
Peer evaluation on Assessment (2% deducted if none submitted)	5%
Health Promotion Project for an Aggregate: See Rubric	20%
Journal: See Rubric	10%
Participation in Conference/Seminar: Participation involves quality of discussion and professionalism during seminar: See Topic Outline	5%
Leadership of one seminar discussion	5%
Cultural Diversity reflection	5%
Safe Administration of Medicine (SAM) test	10%
<b>TOTAL</b>	<b>100%</b>

**Grading Scale**

A 92-100%

B	84-91%
C	75-83%
F	74%

**Academic Honesty (from student handbook)**

“The pursuit of truth demands high standards of personal honesty. Academic and professional life requires a trust based upon integrity of the written and spoken word. Accordingly, violations of certain standards of ethical behavior will not be tolerated at Xavier University. These include theft, cheating, plagiarism, unauthorized assistance in assignments and tests, unauthorized copying of computer software, the falsification of results and material submitted in reports or admission and registration documents, and the falsification of any academic record, including letters of recommendation.

All work submitted for academic evaluation must be the student's own. Certainly, the activities of other scholars will influence all students. However, the direct and unattributed use of another's efforts is prohibited as is the use of any work untruthfully submitted as one's own.

Penalties for violations of this policy may include a zero for that assignment or test, an "F" in the course and expulsion from the University. The dean of the college in which the student is enrolled is to be informed in writing of all such incidents, though the teacher has full authority to assign the grade for the assignment, test or course. If disputes of interpretation arise, the student, faculty member and chair should attempt to resolve the difficulty. If this is unsatisfactory, the dean will rule in the matter. As a final appeal, the academic vice president will call a committee of tenured faculty for the purpose of making a final determination.”

**Caveat:**

The schedule and procedure in this course are subject to change in the event of extenuating circumstances as well as class learning needs and desires.

## NURS 753 Community Assessment Presentation Guidelines

### Purpose and Description:

The purpose of this community assessment is to guide the student in looking at community assets, strengths, and challenges in a community. The community assessment will enable the student to select and examine a community with respect to levels of health care, levels of prevention, and health interventions.

### Guidelines:

1. Each clinical group will assess an assigned community.
2. Utilize the Community Assessment outline for data collection. It is expected that the group will collect data from trusted resources, including individual interviews of community providers and members; observation of the community through windshield and walking surveys; and community participation, when available.
3. Analyze community assessment data. Determine the strengths and risks in the community from the data, interviews and observations of the community. Evaluate which issues are priorities for that community.
4. Complete the nursing process as a part of this assignment. The total presentation will then include:
  - i. Assessment
  - ii. Analysis of the assessment data
  - iii. Nursing Diagnoses for the community (a minimum of two diagnoses for the community) The diagnoses identified in this assignment will be the topic for the group papers in Nurs752.
5. The work will be submitted as a presentation of the relevant and important data. While all data for the assessment outline will need to be researched and recorded, not all data will be given in the presentation. Therefore the group will submit an electronic copy of the presentation, along with a report of all findings (data gathered with citations noted), and any additional materials should be turned in to the your professor on 10/24/2013.
6. Each group will present the assessment and analysis during the seminar time on 10/ 24/13. Each member of the group will participate in this presentation. Presentation medium can be creative, yet professional. Presentation should reflect how the group would present the data to the community leaders.

Each group has 25 minutes for the presentation with 5 minutes for questions.

### Grading:

This assignment contributes 35% to the student's grade for the course. Refer to the evaluation rubric for additional guidance. Please note that the assignment does not have a formal paper requirement

per se, but relevant materials should be included for consideration during grading.

**NURS 753 Community Assessment Presentation Outline/ Rubric**

<b>Topic</b>	<b>Points</b>	<b>Comments</b>
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<p><b>THE COMMUNITY</b></p> <p>A. Describe: General identifying data: urban, rural, etc.  B. Boundaries: Number of miles, blocks, etc. (use maps)  C. History: Industry, construction, and major changes  D. Past and current cultural makeup  E. Anticipated changes (e.g. demolition or building or governmental)</p>	/10	
<p><b>POPULATION CHARACTERISTICS</b></p> <p>A. Total population  B. Population changes including recent immigrant groups  C. Mobility of the population  D. Population demographics: age, sex, race/ethnic groups, religion, income, education level, etc.  E. Principal occupations  F. Percent of individuals / families living in poverty; for example:  <ul style="list-style-type: none"> <li>• Percent of families under 185% Federal Poverty level (FPL)</li> <li>• Percent of single mother families 185% of FPL</li> <li>• Percent of individuals under 100% of FPL</li> <li>• Percent of children receiving free/reduced lunch</li> </ul> G. Cost of Living Index</p>	/10	
<p><b>ENVIRONMENTAL FACTORS–</b></p> <p>A. General description  B. Housing: conditions, owner/renter occupied, etc.  C. Access to healthy food sources (distance/ transportation, cost, quality)  D. Sanitation: Water supply, sewage, and trash/garbage  E. Safety / Protection: Police, fire, safety, crime statistics, etc.  F. Transportation  a. Mass transit available / accessible?  b. Affordable?  G. Leading industry  a. Employment  b. Environmental factors  c. Safety issues for workers  H. Recreational Facilities: Gyms, playgrounds, etc.  I. Shopping Facilities: Type, proximity, etc.  J. Places of worship: Particular denominations, utilization, involvement in the community, etc.  K. Schools: Type, number, condition, Nurses in schools, School-based health clinic, free lunches, etc.</p>	/25	
<p><b>HEALTH INFORMATION–</b></p> <p>A. Walkers, 75% of both sexes, average maternal age, 7 infant mortality, average age of death, etc.  B. Disease incidence and prevalence  C. Leading causes of death  D. Comparison of A-C with other areas (neighboring area, rest of state, US)</p>	/10	

<b>PRESENTATION is:</b> A. Thoughtful and Thorough B. Within time allotment C. Professional D. Clarity	<b>/10</b>	
<b>TOTAL</b>	<b>/100</b>	

**Comments:**

## **Community Assessment Windshield and Walking Surveys**

The purpose of the **windshield Survey** is to get a “feel” for the community. Using the Community assessment rubric as a guide, decide as a group what you will be looking at in your drive around the community. It is often best to have several group members do this together. Be aware of the community and its history, be discrete and unobtrusive. You may wish to assign members to driver, navigator, observer and recorder. You may also want to revisit some areas at a different time/day. Be thinking about the people in that community—what are they seeing, breathing, experiencing such as obstacles to healthy living (and encouragers).

The purpose of the **walking survey** of your community is to get a closer observation of the community and to listen to community member(s) description/ assessment of their community. In order to do this, your clinical group will have to contact someone in the community (school nurse, social service agency, or clinic or possibly a place of worship). You will need to explain your assessment project and your purpose. Ask the nurse/clinician/ social service worker to help you identify a community member that might be willing to give you a walking tour of the community. (This tour may need to be a smaller, targeted area within the community).

Before the tour:

1. Decide on the main question you are trying to answer. What are some questions that may be more specific to further explain issues that you have found in your preliminary look at the community (internet / windshield survey)

Once you have your questions, make a checklist of the questions and those things you would like to observe (maybe it is how kids get home from school or afterschool programs or tai chi in the park).

2. Who will go on the walking tour? Each community is different. Find out what number is needed to get the information and is safe (ask your contacts in the community)

3. Map out the area you will be walking (know your surroundings to some extent).

4. Decide a time and date to do the assessment. Are there activities that you want to observe? Be sure to note the time of day and month that you are assessing. Do activities changebased on time, date, etc.?

5. Note observations and information that you gained by having a community member guide you.

See: <http://ctb.ku.edu/en/tablecontents/chapter3-section21-main.aspx>

For more guidance on windshield and walking surveys

## Community Assessment Peer Evaluation

The community assessment is a group assignment. It is expected that all members of the clinical group participate fully in this assignment. Students will evaluate each of their team members on the following:

Give each of your team mates a point for the following:

- Participated in the planning of the assessment
- Gathered assigned data from the internet
- Planned and /or gathered windshield survey data
- Planned and /or gathered walking survey data
- Participated in putting together presentation

TEAM MEMBER NAME	SCORE (0 - 5)

## **NURS 753: Community Nursing and Public Health Policy Health Promotion of an Aggregate Rubric**

### **PURPOSE**

A major criticism of current community health nursing practice is a shift away from the aggregate or community focus to a family caseload focus. The purpose of this assignment - Health Promotion of Aggregates - is to help students (1) conceptualize the aggregate as a unit of focus and (2) recognize the individual, not only as a member of a family, but also individuals and families as members of other aggregates including organizations, institutions and “theoretically defined” categories. This assignment may be done in pairs.

### **Guidelines**

1. By September 19<sup>th</sup> (or agreed upon date by your clinical faculty) turn in the proposal for your teaching project to your clinical faculty. Your proposal should contain your aggregate, topic, date and location. Do not proceed until your proposal has been accepted by your faculty member. Set a date for the presentation on a day when your faculty will be available to attend.
2. Using Chapters 15 in Lundy’s Community Health Nursing (on blackboard) as a guide, develop, implement and evaluate your selected health promotion plan. Develop a teaching plan, using the “Behavioral Objectives” and the “Teaching Plan” document on Blackboard. Turn in your teaching plan into your faculty member *one week before the presentation*.
3. Implement your teaching project in your community. Your faculty member will be in attendance.
4. Write a brief evaluation of the Health Promotion activity. Using the learning objectives in step 2, evaluate the health promotion activity. Did the learner meet the objectives? Were objectives measurable? What would you change in the plan (might be the education plan or the evaluation plan). This is to be turned into your faculty member one week after the presentation.

NAME: \_\_\_\_\_

**NURS 753: Community Nursing and Public Health Policy  
Health Promotion of an Aggregate Rubric  
FALL 2012**

	<b>Points</b>	<b>Comments</b>
1. Select an appropriate aggregate. Discuss with faculty.	/10	
2. Define the learner (age, gender, SES etc.)	/5	
3. Define the learner need. a. How did you determine the need? b. What is the developmental level of the learner? c. Were materials at a literacy level appropriate to the aggregate?	/15	
4. Lesson plan following ONA guides. a. Behavioral objective – 5 pts. b. Content – 5 pts. c. Teaching method– 5 pts. d. Evaluation tool– 5 pts.	/20	
5. Evaluation of program a. Assess learner outcome b. Assess teacher effectiveness	/15	
6. How did you apply ANA Standards of Community/Public Health Nursing Practice?	/15	
8. Presentation at site was professional and clearly presented	/15	
9. APA format of final report references.	/5	

**Total Possible Points:100    Points Earned: \_\_\_\_\_**

**NURS 753  
Community Nursing and Health Care Policy Practicum  
Journal Rubric**

**Journal Guidelines:**

1. Each student will keep an electronic journal; making entries after each clinical day and after the seminar. **All entries must include the specific date, clinical/seminar experience, and the time in activity (e.g. 8am – 1pm)**
2. The journal serves as a means of self-evaluation and reflection on the clinical experience or the topic of the seminar. Journal entries are to assist the student in the integration of experiences with course objectives. Reflection on progress in course objectives and integration of knowledge from didactic (NURS 752) should be included on a regular basis.
3. The journal will be due every two weeks on Monday (9AM; see Topical Outline for schedule) per email to clinical faculty. Turn in last journal on Thursday, December 6th, by 12Noon.
4. The journal should be at least half page in length for each entry.

**Rubric:**

	<b>Possible Points</b>	<b>Points Earned</b>
1. Journal demonstrates self-reflection	50	
2. Journal demonstrates integration of Community objectives / knowledge gained from didactic	40	
3. Minimum ½ page in length per entry; hours/date top of each entry	10	
	_____	_____
<b>Total Possible Points:</b>	100	<b>Points Earned:</b> _____

Average of journal points = 10% of grade

NURS 753  
Seminar participation and leadership

Attendance and participation in seminar and discussions is expected. Students are expected to show respect to the speakers by being prompt, giving speaker and discussion leader full attention, and participating in activities or discussion. Cell phones and laptops will be silenced and put away during speaker presentations.

Discussions within your clinical group are a great opportunity to practice skills of leadership. Each student will be assigned one week to lead the clinical group discussion after the speaker. Discussions should include application of speakers content to the community setting, and planning and work on group projects (community assessment and diversity assignment). The leader should also engage the group in reflecting on community practicum experiences, such as opportunities, challenges, and lessons learned.

Rubric for Leadership in discussion

	Points	Comments
Student leader was prepared to lead the discussion a. Discussion points from speaker's topic b. Aware of timely work needs on group project (e.g. assessment assignments) c. Had prompts prepared for discussion on community settings (to elicit discussion of practicum settings)	/40	
Student leader was aware of time and kept conversation moving in a respectful manner	/20	
Student leader elicited conversation from all group members, assuring that all were heard.	/20	
Student leader made assignments or reminders for future activity, as appropriate.	/10	
Student leader was professional in appearance and manner.	/10	
<b>TOTAL</b>	<b>/100</b>	

## Cultural Diversity Assignment

Aggregate: Individuals/ families who are homeless.

Objective: Expand awareness of the challenges to health for persons who are homeless through a service and communication learning experience.

Before volunteering:

1. Read Spenser, M. (2008). Social worker's reflections on power, privilege, and oppression. *Social Work* 53(2),99-101. (on Blackboard)
2. Play video game "Spent" at [www.playspent.org](http://www.playspent.org) . I encourage you to play at least twice.

Guidelines:

1. Call and arrange a time to volunteer with one of the agencies on the list- preferably in your assigned community (for the assessment).
2. Let the contact know how many will be coming. (Many agencies are limited in the number of students that can come at one time.) This assignment may be completed in groups of up to four but the group MUST get the approval of the agency regarding the number of students to come at one time
3. Time expectation is 2-4 hours at the agency. Time has been allocated for this assignment on 10/17/12 during seminar time, although students may do the assignment anytime before October 31st.
5. The type of volunteerism is not as important as the opportunity to meet face to face with persons who are culturally diverse and are without permanent housing. The student is to be professional in this encounter, but it is not meant to be therapeutic.
6. The student will journal about this encounter with examples of interactions with individuals who are facing homelessness. Students should not use full names of clientele or take pictures of the experience.
7. The journal entry should include the date, time, and agency name and contact with a 2 - 3 page reflection on the experience. **Due on October 31st.** Questions to reflect on:
  - a. What is a typical day like for this population?
  - b. What are the barriers they face in caring (generally and specific to any illness) for their own health or their family?
  - c. What is their access to health care? What barriers do they face in accessing care?
  - d. Did the readings, video game and experience provide you with different perspectives that will be useful in future work in nursing? Describe how.
8. The students will participate in a small group discussion during seminar on October 31st.

## **SAFE ADMINISTRATION OF MEDICATIONS (SAM)**

As per MIDAS SAMS policy

The SAM tests within this designated course will count for 10% of the course's overall course grade and the content will be cumulative to reflect previous knowledge.

- a. For each SAM, the goal is that all students will achieve a score of 90%.
- b. If a score of 90% is not achieved then the student will need to do remediation as determined by the clinical course coordinator.
- c. After remediation the student who did not make 90% on the first test will retake the test one time.
- d. If the student makes a 90% or greater on the retake this grade and the previous grade will be added together and the average will be counted as the 10% of the grade.
- e. Failure to make a 90% on the retake will result in a 0% for the SAM's grade and this will be counted as the 10% of the overall course grade. Thus the second failure will result in an automatic deduction of 10% from the overall grade of the designated course.