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Nursing’s Role in Population Based Issues

Abstract

A public health nurse is an all-encompassing role in which one must provide care to communities, monitor for changes, identify new trends and also plan and prepare for such events. This paper examines varying roles a community health nurse participates in, including direct and indirect patient contact. It also examines the American Nurses Association guidelines for a community health nurse.

Nursing’s Role in Population Based Issues

Nurses encompass many different roles; teacher, nurturer, healer, and helper. Nurses can occupy a variety of positions, in a mix of places. One of the most important roles that a nurse can occupy is a community health nurse. Patricia Donahue stated, “Nursing is based on society’s needs and therefore exists only because of society’s need for such a service”. As a community health nurse, one must focus on caring for “a population of individuals, families, and groups, or the community as a whole,” (Harkness & DeMarco, 2012, pp. 3). With this definition of community health nursing and the quotation from Donahue, one can gather that community health nursing is based on whatever the population needs and focuses on its weaknesses to help deliver population centered care.

The title of a community health nurse seems all encompassing. In reality there are many different aspects of public health. One goal of public health nursing is to prevent disease and disability and promote and protect the health of an entire community (Harkness & DeMarco, 2012, pp. 3). In order to fulfill this goal, there are different job duties and tasks that need to be met. A public health nurse may work in direct contact with the population, or they may analyze data and statistics and help plan for community based changes in order to meet the deciphered needs of the community.

When examining a community in Michigan, Kent County, one can observe their notifiable disease report and examine trends and statistics. When investigating Kent County’s disease report, a marked number of cases of Chlamydia are present in the county (Kent County Health Department, 2011). When gathering and analyzing these statistics, there are many processes that need to be met. Part of the process includes direct contact with the patient, either in private or public health clinics. Some of the public health clinics offered are state funded, including Planned Parenthood and the Kent County Health Department. By being a public health nurse in the clinic setting, the nurse must be objective so that the patient can feel comfortable in discussing private matters, especially sexuality and the possible presence of an infection. Nurses may work independently and with nurse practitioners to screen patients for communicable diseases and identify at risk behaviors. According to the American Nurses Association (ANA), to be a public health nurse one must encompass communication skills, cultural competency skills and analytical assessment skills (ANA, 2010). In practice, the nurse must use the assessment skills to accurately identify potential threats to the community and also be able to recognize escalating trends in order to take measures to stop the developments. The public health nurse must also be able to effectively communicate with others in regards to the threats and/or instances of disease. With effective communication, the nurse must be culturally competent with the various groups of people that are located within the community (ANA, 2010). In Kent County, there are a wide range of nationalities including Hispanic, Asian, African American and Caucasian (US Census Bureau, 2011). By recognizing different cultural properties, the nurse will be able to implement strategies in a way that will be assimilated in to each culture.

Along with being in direct contact with the population, there are nurses that play the role of analyzing, planning and implementing the changes made from the data that was collected. This public health nurse may be employed by private or public agencies to analyze the data that was composed. Some of these agencies may include the State of Michigan or the United States Government. Their role post-data collection may include collation builders, change agents, policy or political activists, and/or researcher. These roles encompass a variety of tasks that are used to help recognize the change and presence of disease, plan for control and prevention of disease and also implement the plans based on community need. The plans must meet educational standards, all the while identifying and achieving cultural needs (Harkness & DeMarco, 2012). When in this role, the ANA reports a public health nurse must encompass policy development and planning skills, be able to assess a community as a whole, have a general knowledge of the science behind public health and also have leadership skills (ANA, 2010).

As a nurse, one must have a good bedside manner, be able to communicate effectively with patients and families, and also be unbiased. These attributes are vital when one works in the public factor of health. When examining and helping treat patients with sexually transmitted infections including Chlamydia, the nurse at the bedside or behind the scenes must be able to be objective in order to process the data appropriately. Any public health nurse must be able to identify common themes and recognize upcoming trends. Although the roles are similar, there are differences involved. When a nurse is analyzing the data, one must have a wealth of knowledge related to statistics and the use of trends, numbers, and quotas in relation to evidence of disease. A nurse must be able to decipher the statistics and process them to be able to identify and plan change in the community. Another aspect that varies is the planning of change. Much of the plans that are designed for the community occur at the indirect level of patient care.

By having indirect and direct contact public health nurses, it allows for all aspects of public health nursing to be addressed. It promotes a more thorough operation related to the fact that the direct nurse can collect data and assess patients, while the indirect nurse processes the information collected. With this a more efficient system is in place. This process also allows for each person in the operation to excel and become an expert in their particular field.

As a health care provider I feel that most of my skills reside at the bedside. I believe that I have good bedside manner and I make my patients feel at ease. With this, I believe my patients feel that they can confide in me and trust me with their personal information. I work in the emergency department and so I believe my assessment skills are thorough which is beneficial for identifying trends. I have also worked as a home care nurse so I am able to identify community needs and I am able to access resources that are available. As for the indirect patient contact, I do not have a strong background in statistics or analyzing data but I do find it interesting. I however prefer to work in patient care, so I feel I would not be the best candidate for this position. In order to feel competent in the direct patient care role as a public health nurse, I would have to familiarize myself with local community resources in my present area, Milwaukee, WI. I also believe that I would need to better identify the varying cultural aspects in the city and become more culturally competent. In order to identify and process the statistical information I would also have to become more knowledgeable with statistical information and analyzing varying measurements.

As a public health nurse, one must be competent in not only direct patient care but also be able to identify trends and plan and prepare a community for risks. Their job is all encompassing, which requires highly trained individuals to be able to plan for possible threats. On top of all their duties, they first and foremost must be a nurse in which they care for their patients and provide patient-centered care for the whole community. The community is who a public health nurse serves, and it is at their discretion in which the care is focused. It is vital to be able to meet their needs and assist them in any way possible.

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