

Educational Bag

Community Health Nursing

Dr. Noora Hama Karim

Objectives

General objectives:

- To apply knowledge base of Community health nursing through the application of nursing process in a community settings.
- To perform the role of the Community health nurse in community settings.
- To provide appropriate nursing care to the community based on their needs and problems.

Specific objectives:

This course is designed to present students with information concerning community health nursing and the application of the nursing process, the roles of the community health nurse in variety community settings, such as school, family, industry, and environment.

Community Health Nursing

Lecture 1

Introduction to Community Health Nursing

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Outlines:

- Definitions: Health, Nursing, Community, Community Health, public Health and Community Health Nursing
- Community-based Nursing, Population- Focused Nursing
- The mission of Community Health Nursing
- Characteristics of Community Health Nursing
- Components of Community Health Nursing
- Community Health Nursing Standards
- Roles and Functions of Community Health Nurse

Definitions

Concept of Health

- **Illness:** state of being relatively unhealthy
- **Health:** holistic state of well-being, including soundness of mind, body, and spirit. Health: a state of complete physical, mental and social well-being and not merely the absence of disease and infirmity.
- **Wellness:** health plus the capacity to develop one's potential, leading to a fulfilling and productive life

Nursing play critical role in promotion of health, prevention of illness, and care of ill and disabled people of all ages, in all settings.

Community: a group of people who share common interests, who interact with each other, and who function collectively within a defined social structure to address common concerns.

The Three Features of a Community

A community has three features:

- **Location:** every physical community carries out its daily Existence in a specific geographical location .The health of the Community is affected by this location, including the placement of the service, the geographical features...
- **Population:** consists of specialized aggregates, but all of the diversified people who live within the boundary of the community.
- **Social system:** the various parts of communities' social system that interact and include the health system, family system, economic system and educational system.

Definitions

Aggregates: subpopulations within the larger Population that possess some common characteristics often related to high risk for specific health problems such as School-aged children.

Population-focused nursing: Care directed toward the overall health of aggregates, communities or population groups.

Community based nursing: Focuses on illness care of individuals and families across life span.

Public Health and Public Health Nursing:

•**Public health is** the science and art of protecting and improving the health of people and their communities through education, promotion of healthy lifestyles, and research for disease and injury prevention.

•**Public Health Nursing: The practice of promoting and preserving health of population using Knowledge from nursing, social, and public health sciences.**

Public health nursing refers to composition of nursing services and health promotion of the population.

It is aimed to:

- Improve sanitation
- Control of community epidemics
- Prevent the transmission of infection
- Provide education about the basic principles of Personal hygiene
- Organize medical and nursing services for early diagnosis, prevention and treatment of diseases.

Community Health Nursing

Community Health: The identification of needs and the protection and improvement of collective health within a geographically defined area.

Community Health Nursing: is a synthesis of nursing (knowledge and practice) and the public health (science and practice), implemented via systematic use of the nursing process to promote health and prevent illness in population groups.

The Philosophy and Mission of Community Health Nursing:

Philosophy of CHN:

is based on the belief that care directed to the (individual, family and groups) contributes to the health care of the population as a whole.

CHN: give the correct care for the community and use is preventive rather than curative and rehabilitative by achieving the goals (health promotion, health maintenance and disease prevention).

Mission:

The primary mission of community health nursing is improving the overall health of the population through health promotion, illness prevention, and protection of the public from a wide variety of biological, behavioral, social and environmental threats.

"promote the good life" in all of its physical, social, psychological, cultural, and economic aspects

Characteristics of Community Health Nursing:

1. Community health nursing is an integral part of public health.
2. It is a specialized field of nursing.
3. It synthesized public health with the practice of nursing.
4. Community health nursing gave care as primary health or primary prevention.
5. Community health nursing promotes self-care responsibility.
6. Community health nurses provide continuous care, not episodic care.
7. Community health nursing deals with a wide range of health problems and health needs and providing need-based generalized health services

Community Health Practice:

Community health Practice: It is part of the larger public health effort that is concerned with preserving and promoting the health of specific populations and communities.

Community health practice incorporates six basic elements:

1. Promotion of health.

Includes all efforts that seek to move people closer to optimal wellbeing or higher levels of wellness.

2. Prevention of health problems.

Prevention means: Anticipating and averting problems or discovering them as early as possible to minimize potential disability and impairment.

3. Treatment of disorders:

It focuses on the illness end of the continuum

Community Health Practice:

4. Rehabilitation.

involves efforts to reduce disability and, as much as possible, restore function. e.g:Stroke rehabilitation

5. Evaluation.

The process by which that practices is analyzed, judged, and improved according to established goals and standards.

6. Research: Is systematic investigation to discover facts affecting community health and community health practice, solve problems, and explore improved methods of health services.

Community Health Nursing Standards of Care

- 1- Assessment
 - Level I: Data Collection
 - Level II: Data analysis and Interpretation
- 2- Outcomes Identification
- 3- Planning
- 4- Assurance or Intervention
- 5- Evaluation

Community Health Nursing Standards of Performance

- Quality of care
- Performance appraisal
- Education
- Collegiality
- Ethics
- Collaboration
- Research
- Resource utilization

Community Health Nursing

Nursing Process and Epidemiology in CHN

CHN uses the nursing process and epidemiology interchangeably and in an Integrative approach. Both share commons with regard to the process through which (assessment, planning, intervention, and evaluation)are employed.

Settings for Community Health Nursing Practice:

- Homes.
- Schools.
- Ambulatory Service Settings.
- Occupational Health Settings.
- Residential Institutions.
- Community at Large.

Community Health Nursing Roles:

- **Caregiver:** Uses the nursing process to provide direct nursing intervention to individuals, families, or population groups
- **Educator:** Facilitates learning for positive health behavior change
- **Advocator:** Speaks or acts on behalf of clients who cannot do so for themselves to help clients gain greater independence or self-determination, and to make the system more responsive and relevant to the needs of clients
- **Case Manager:** Coordinates and directs the selection and use of health care services to meet client needs, maximize resource utilization, and minimize the expense of care

Community Health Nursing Roles:

5. **Collaborator:** Engages in shared decision making regarding the nature of health problems and potential solutions to them
6. **Coordinator:** Organizes and integrates services to best meet client needs in the most efficient manner possible
7. **Counselor:** Teaches and assists clients in the use of the problem solving process
8. **Consultant:** Presents consultation in specific area of interest or specialty.
9. **Researcher:** Conducts studies to explain health-related phenomena and to evaluate the effectiveness of interventions to control them

Questions

- **What is the philosophy of community health nursing?**
- **What is the role of community health nursing?**
- **Numerate the Characteristics of Community Health Nursing:**

Dimensions of Community Health Nursing

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Outlines

- **Dimensions of health**
- **Dimensions of health care**
- **Dimensions of nursing**

Dimensions of Community Health Nursing

Dimensions of Community Health Nursing: consists of three elements:

- **The Dimension of health:** These dimensions are factors that determine the population health ,six categories of factors that can be used to organize a community health assessment, **guide** the nurse assessment of client (individual, family, population) health status.

The dimensions of health

- **Biophysical dimension:** includes factors related to human biology that influence health:-
 - Age & development level
 - Genetic inheritance
 - Physiologic function
- **Psychological dimension :-**
 - Internal psychological environment; e.g : ability to cope with stress
 - External psychological environments; e.g : stressful life events

Dimensions of Community Health Nursing

- **Environmental dimension :-**

- * Physical environment: weather, geographical location, soil composition, temperature, humidity, radiation.

- * Environmental hazards: exposure to pathogens, allergens, pollution.

Sociocultural dimension :

Factors within the social environment that influence health positively or negatively: snaa

- * Social structure; employment, economic, politic

- * Societal norms; culturally accepted behaviors

- * Societal attitude; stigma attached to HIV infection, Feeling, thinking, and belief of health issue.

- * Social action; legislation to immunization

- **Behavioral dimension:** includes the personal behaviors that either promote or impair health :
Dietary practices, recreation & exercise, substance use & abuse, sexual activity

Dimensions of Community Health Nursing

- **The health system dimension:** It refers to the way in which the health services are organized and provided :

B - Dimension of health care

The dimension that covers the plan for the nursing intervention and guide nursing intervention to the identified health needs and problem. (Process to provide health care)

Prevention: Disease prevention includes measures such as risk factor reduction, prevent the occurrence of disease, arrest its progress and reduce its consequences once established.

Primary Prevention: Prevention of the occurrence of a condition or a problem, Health promotion, Illness and injury prevention.

Secondary Prevention: Screening, diagnosis, and treatment.

Tertiary Prevention: Prevention of consequences and prevention of recurrence of the problem.

Dimension of Health Care

B - Dimension of health care

The dimension that covers the plan for the nursing intervention and guide nursing intervention to the identified health needs and problem. (Process to provide health care)

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Dimensions of Community Health Nursing

C - Dimension of nursing includes:

- **Cognitive dimension; knowledge**, cognitive, critical thinking, needed for the nurse to identify client health needs and to plan and implement care to meet those needs.
- **Interpersonal dimension** : effective elements and interaction skills
 - Effective elements include attitude and value of the Community health nurses that influence his/her ability to **practice** effectively and to **Interaction** skills and the abilities to collaborate and communicate effectively with others
- **Ethical dimension:** Ethical decisions making and advocacy.
- **Skills dimension:** Manipulative skill (the **ability to perform**) and intellectual skill (**capacity for critical thinking**)
- **Reflective dimension:** Theory development, Research, Evaluation

Dimensions of Community Health Nursing

Process dimension: is framework that guides the community health nursing practice in term of presenting (resources, preventive care, and health care services) by using scientific knowledge and several specific systematic processes utilized in the provision of care to the (individual, family, group, community, aggregate, and society) based on their needs and problems.

It provides the basis of critical thinking in nursing care and also considers systematic process of problem solving approach and used to identify factors that influence the health of the population.

It aims for health promotion, disease prevention, & health maintenance.

Process dimension include: nursing process, epidemiologic process, health education, home visits, case management, change process, group process, leadership process, and political process.

Questions

- **Explain the dimensions of nursing**
- **Numerate the dimensions of health care**

Community Assessment

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Outlines:

- Approaches For Community Assessment**
- Functions of Community Assessment**
- Principles of Community Assessment**
- Data Sources for Community Health Assessment**
- Types of Community Needs Assessment**
- Community Assessment Methods**
- Sources of Community Data**

Community Assessment

Community assessment: It is the process by which data are compiled regarding a community's health status and resources and from which nursing diagnoses are derived.

Population or Community health assessment can be approached from two perspectives:

- **A need assessment approach** focuses on community health problems.
- **A population assessment**, on the other hand, provides an overall picture of community health status, including community strengths and assets as well as needs and needs or problems.

Community Health Assessment

Community health assessment can serve a variety of functions, including:

- Identifying problems, risk factors, and needs as perceived by its members
- Determining its interests and priorities related to health.
- Describing population lifestyles;
- Delineating community strengths and resources;
- Facilitates decision making, particularly with respect to resources allocation;
- Provide skill training for residents;
- Facilitates group mobilization;
- Enables consciousness raising.

Principles of Community Health Assessment

- 1 Multiple sources of information should be sought to provide an overall picture of community health rather than the view of one segment of the population.
- 2 Assessment should address the needs of specific subgroups within the population (e.g., vulnerable populations such as the older adults or members of diverse cultural groups).
- 3-Assessment should consider all potential stakeholders in the population. Stakeholders are those concerned with the outcome of the assessment (e.g., community residents, officials, health care providers, funders).
- 4-Assessment should identify population assets as well as needs and problems.
- 5-Assessment should be conducted or directed by persons with experience in population health assessment.

Data Sources for Population Health Assessment

Assessment data may be either quantitative or qualitative .

- **Quantitative data** reflect numbers of people, characteristics, or events within the population. (number of people in specific age or ethnic groups and rates of specific diseases and causes of death within the population).
- **Qualitative data** focus on perceptions of health, attitudes, and health concerns as voiced by members of the population (community members' identification of adolescent pregnancy, substance abuse).

• **Types of Community Needs Assessment**

- **Comprehensive assessment:** survey about all demographic information on the population (size, density, composition) & all community health information.
- **Community subsystem assessment:** CHN focuses on a **single** dimension of community life (survey religious organization)
- **Problem – oriented assessment:** assess the community in terms of problem
- **Community assets assessment:** focuses on the strengths & capacities of a community rather than its problems.
- **Familiarization or: windshield survey;** is a useful community / public health nursing tool in helping to familiarize the nurse to a community or neighborhood. It is often called a windshield survey as nurses frequently conduct the familiarization survey through a bus or car windshield:
Nurse dive or walk around the community of interest, Find health, social, and governmental services.

Community Assessment Methods

- **Surveys:** series of questions is used to collect data for analysis of specific group or area
- **Descriptive epidemiologic Studies:** examines the distribution of health condition in a population (who, where, when) (Who is affected?), by place (Where does the condition occur?), and by time (When do the cases occur?).
- **Focus group:** Open discussion with 5-15 people to obtain group opinion, Open discussion with 5-15 people to obtain group opinion, Begin with a set of pre-selected question
- **Community Forums/town hall meeting:** Open public meeting to obtain community opinion , Open public meeting to obtain community opinion , Begin with describing the situation to be discussed

Source of Community Data:

- **Primary sources:** Information gathered by talking to people provides, the data are obtained directly from the community
- **Secondary sources:** include people who know the community well and the records such people create in the performance of their jobs. Specific examples are health team members, client records, community health (vital) statistics, census bureau data, reference books, research reports, and community health nurses.
- **International Sources: International data:** are collected by several agencies, including the World Health Organization (WHO).
- **National Sources**
- **State and Local Sources:** data comes from the state health department. This official agency is responsible for collecting state vital statistics and morbidity data.

Questions:

- **What is the benefits of community assessment?**
- **What is the source of community**

Approaches to Community Health:

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Outlines:

Health Promotion

Case Management

Empowerment

Health Promotion

Health Promotion: is a process that fosters people's ability to improve their own health by increasing their control of its determining factors. Health promotion is more than educating people to change their behavior;

Strategies for Health Promotion:

- **Health Education** is the use of learning experiences to improve people's knowledge or change their attitudes for the purpose of fostering health.
- **Social Marketing**, as a health promotion strategy, uses information about the factors that influence behavior in specific population groups to promote adoption of health-related behaviors or elimination of unhealthy behaviors. Social marketing is a process designed to change negative behaviors or maintain positive ones for the benefit of the individual and the society

Health Promotion

- **Legislation** is another approach to health promotion that mandates individual behavior or creates conditions that promote health. For example, a ban on the display of tobacco products in stores in Ontario, Canada decreased tobacco promotion and youth exposure to tobacco marketing
- **Use of Community Health Workers.** The final strategy for promoting health in populations is the use of CHWs to disseminate health promotion messages and to foster health-promoting behaviors in the population. Because of the growing shortage of health care professionals, there are not enough personnel to meet the needs for health promotion efforts among the population

Case Management

Case management is a collaborative process between the case manager and the client and his or her family designed to identify and meet health care needs through quality, cost-effective services

Elements of the Case Management Process

- Intake
- Assessment of needs, problems, and outcome goals
- Development of the case management plan
- Implementation of the plan and coordination of activities
- Monitoring and evaluation of outcomes
- Modification of the plan as needed
- Disengagement and termination of services

Empowerment

Empowerment: is “a social action process that promotes participation of people and communities toward goals of increased individual and community control, improved quality of life and social justice.

Community empowerment arises from activities related to community development, community organizing, community mobilization, and community building. Empowerment, in turn, leads to increased community capacity and competence.

Levels of Empowerment: may occur at several levels, including individual community members, organizations within the community, and the community at large.

Key domains or goals of empowerment have been identified.

These domains include the following:

- **Community activation:** Promoting community members’ participation in community problem solving.
- **Competence development:** Developing community members’ expertise in problem solving.

Empowerment

- **Program management skill development:** Fostering program management and team-building skills among community members; promoting skill in planning, implementation, and evaluation methods; and promoting use of evidence-based solutions and strategies.
- **Creation of a supportive environment:** Developing lobbying and political advocacy skills and linking community groups to resources

Questions:

- **Numerate the Elements of the Case Management Process**
- **Explain the concept of health promotion with example**

Primary Health Care

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Outlines:

- **Definition of Primary Health Care**
- **Principles of Primary Health Care**
- **Elements of Primary Health Care**
- **Primary health care and community Health Care**

Primary Health Care

Primary Health Care: is an approach for providing Health Care resources that focuses on provision of essential Health Care using socially acceptable & affordable methods & technology, accessibility, public participation in policy development & intersectoral collaboration.

The ultimate goal of primary health care is better health for all.

WHO has identified five key elements to achieving that goal:

- Universal coverage to reduce exclusion and social disparities in health;
- Service delivery organized around people's needs and expectations;
- Public policy that integrates health into all sectors;
- Leadership that enhances collaborative models of policy dialogue; and
- Increased stakeholder participation.

Elements or Components or activities of PHC:

- Education to prevent or control major's health problems in the area.
- Prevention & control of endemic diseases.
- Immunization
- Adequate treatment of common illness & injuries.
- Provision of essential medication.
- Basic laboratory services.
- Referral services.
- Provision of maternal & child health care, family planning services.
- Promotion of nutrition & safe & sufficient food supply.
- Provision of safe water & basic sanitation.

Principles of Primary Health Care

- Improvement in the level of health care of the community.
- Favorable population growth structure.
- Reduction in the prevalence of preventable, communicable and other disease.
- Reduction in morbidity and mortality rates especially among infants and children.
- Extension of essential health services with priority given to the undeserved sectors.
- Improvement in basic sanitation.

Principles of Primary Health Care

7. Development of the capability of the community aimed at self-reliance.
8. Maximizing the contribution of the other sectors for the social and economic development of the community.
9. Equitable distribution of health care—according to this principle, primary care and other services to meet the main health problems in a community must be provided equally to all individuals irrespective of their gender, age, and caste, urban/rural and social class.
10. Community participation comprehensive healthcare relies on adequate number and distribution of trained physicians, nurses, allied health professions, community health workers and others working as a health team and supported at the local and referral levels
11. Multi sectional approach recognition that health cannot be improved by intervention within just the formal health sector other sectors are equally important in promoting the health and self reliance of communities
12. Use of appropriate technology medical technology should be provided that accessible, affordable, feasible and culturally acceptable to the community

Primary Health Care

Primary Health Care is different in each community depending on:

- Needs of the residents
- Availability of health care providers
- The communities' geographic location and Proximity to other health care services in the area

Role of Community Health Nurse in Primary Health Care:

- Community health nurse Work with population, community, family, individual.
- The focus is multiple to promote health, maintaining a degree of balance toward health.
- Community health nurse Focus on assessment of the impact of socio economic and cultural factors affecting health measures that must constantly dealt with.
- Community health nurse works with spectrum of health and illness conditions (minor- severe), (acute – chronic).
- Community health nurse works in school where primary goal is health education and disease prevention
- Community health nurse Work in industry to improve the production and employees' safety.
- Community health nurse is responsible for assisting patients and families to coordinate health care, which necessitates contacts with other health personnel and community agencies.

Questions:

- **What is the elements of Primary Health Care?**
- **What is the Role of Community Health Nurse Care in Primary Health Care**

Family Health Services

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Outlines:

- Definitions : family, family health
- Types of family
- Family structure and function
- Family development
- Family theories
- Family assessment
- Family intervention process
- Family care giving
- Influences of culture and society on the health of families
- Ethical principles related to care of families
- Family health promotion

Types of Family:

Family: is a group of two or more person related by birth, marriage, or adoption and residing together.

Types of family:

- Nuclear family: consists of husband, wife and perhaps one or more children.
- Extended family: includes members of the nuclear family and other relatives, aunts, uncles, grandparents and cousins.
- Blended families: are formed when parents bring unrelated children from prior marriages into a new family.
- Single parent families: are formed when one parent leaves the nuclear family because of divorce or death.

Family Functions:

- 1. Reproductive Function of the Family:** Providing Affection: The family functions to give members affection and emotional support. Continued affection creates an atmosphere of nurturance and care for all family members that is necessary for health, development, and survival.
- 2. Economic Function of the Family:** Family members often serve as the financial needs providers to their families.
- 3. Health Care Function of the Family:** Family members often serve as the primary health care providers to their families.
- 4. Providing Security and Acceptance:** Families meet their members' physical needs by providing food, shelter, clothing, health care, and other necessities; in so doing, they create a secure environment. Members need to know that these basics will be available and that the family is committed to providing them.

Family Functions:

5. Promoting Affiliation and Companionship: The family functions to give members a sense of belonging throughout life. Because families provide associational bonds and group membership, they help satisfy their members' needs for belonging.

6. Providing Socialization: Major function for families is to raise and socialize their children to fit into society. Families transmit their culture, their values, attitudes, goals, and behavior patterns to their members. Members, socialized into a way of life that reflects and preserves the family's cultural heritage, pass that heritage on, in turn, to the next generation.

7. Establishing Controls: The family functions to maintain social control. Families maintain order through establishment of social controls both within the family and between family members and outsiders.

Stages of Family Development:

- **Stage 1: Adult is newly married, with no children**
- The person assumes the spousal role
- **Stage 2: First child is born**
- Role of parent is added
- **Stage 3: Oldest child is between 2 and 6**
- Role of parent changes
- **Stage 4: Oldest child is in school**
- Parental role changes again

Stages of Family Development:

- **Stage 5: Oldest is an adolescent**
- Parental role changes again
- **Stage 6: Oldest child leaves home**
- Parental role involves helping child become independent
- **Stage 7: All children have left home**
- Sometimes called the post-parental stage
- **Stage 8: One or both spouses have retired**
- Worker role ends

Family Health

Family health: as a “dynamic changing relative state of wellbeing which includes the biological, psychological, spiritual, sociological, and culture factors of the family systems.

Determinants of family health:

- Living and working conditions
- Physical environment,
- Psycho-social environment
- Education and economic factors
- Health practices
- Cultural factors
- Gender.

Family Theories

- **Systems models** view families as open systems in which the whole of the system is more than the sum of its component parts or members.
- **Family Life Cycle models:** based on the supposition that human beings and social units, such as families, develop in a logical fashion with predictable stages or milestones along the way. Each stage in the family life cycle is accompanied by transitions to which the family must adapt.
- **Symbolic interaction models:** views the family as a group of interacting individuals whose interactions shape the roles and personalities of its members.

Care of Families:

- **Assessment of family health:** takes place with respect to individual families and the overall health of families within the population. Factors related to each category of health determinants affect the health status and health needs of families. Biological, psychological, environmental, sociocultural, behavioral, and health system determinants of family health
- **Diagnostic Reasoning and Care of Families:** The data obtained during family health assessment enable the nurse to make informed decisions about the health care needs of families.

Care of Families:

- **Planning and Implementing Health Care for families:**
 - **Health Promotion**
 - Safety education.
 - physical activity
 - Nutrition education.
 - **Illness/ injury prevention**
 - **teaching effective hygiene**
 - **referral for immunization**
- **Resolving Health Problems:** Problem-resolution activities with families may assist families in obtaining needed care for existing health problems or helping families deal with these problems. For example, the nurse might refer a family with a substance-abusing member to community resources to help them deal with the problem.

Care of Families:

Evaluation of family care: Evaluation of family care begins as the nurse examines the adequacy of assessment data and continues as he or she evaluates alternative approaches to meeting families' health needs.

Questions:

- Numerate the types and benefits of family
- Apply nursing process to care of family health

**Health care of aggregates:
Children, adolescents, adults,
and elderly**

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Care of children and adolescent

- **Childhood** is a critical period during which certain behaviors or health conditions are known to lead to more serious adult illnesses, it is vital for community health nurses and school nurses to screen children and identify problems early

Health Problems of School-Age Children:

- Diabetes
- Asthma
- Autism spectrum disorders (ASDs)
- Cystic fibrosis
- Spina bifida
- Neuromuscular disorders
- Juvenile rheumatoid arthritis

Health Problems of School-Age Children:

- Seizure disorders
- Hemophilia
- Congenital heart disease
- Attention deficit hyperactivity disorder (ADHD)
- Nutritional problems—*anemia or obesity/ overweight*
- Cerebral palsy
- Mental illnesses

Health Problems of School-Age Children:

- Emotional Problems and Suicide
- Violence
- Substance Abuse
- Teen Sexuality and Pregnancy
- Sexually Transmitted Infections
- Acne
- Poor Nutrition and Eating Disorders
- **Other conditions** may also be defined as chronic, such as allergies, ear infections, and sinusitis; and hearing or speech disorders.

Adolescence

- **Adolescence is a** time of self-discovery, movement toward self-reliance, increasing opportunities, and pivotal choices that can affect the remainder of an individual's life. Adolescence generally begins with puberty and encompasses the ages between 10 and 24;

It consists of

- Early adolescence (aged 10–14),
- Middle adolescence (15–17),
- Late adolescence (18 to mid-20).
-

Health Services for School-Age Children and Adolescents

- Community health nurses play a major and vital role in delivering these services. Such programs fall into three categories that approximate the three practice priorities of community health nursing practice: **Illness prevention, health protection, and health promotion.**

Health Services for School-Age Children and Adolescents

- **Preventive Health Services:**

- Immunizations programs
- Parental support services
- Family planning programs
- Services for those with STIs, and alcohol and drug abuse prevention programs.

- **Health Protection Services**

- Accident and injury control
- Programs to reduce environmental hazards and control infectious diseases
- Services to protect children and adolescents from child abuse and neglect.

Health Services for School-Age Children and Adolescents

- **Health Promotion Services**

- Nutrition and weight control
- HIV/AIDS prevention
- Smoking alcohol, and drug abuse education.

Care of women and men

Adult: is defined as anyone 18 years of age or older

10 leading causes of death for all people in rank order included the following:

1. Diseases of the heart 616,067
2. Malignant neoplasms 562,875
3. Cerebrovascular diseases 135,952
4. Chronic lower respiratory diseases (CLRDs) 127,924
5. Accidents (unintentional injuries) 123,706
6. Alzheimer's disease 74,632
7. Diabetes mellitus 71,382
8. Influenza and pneumonia 52,717
9. Nephritis, nephritic syndrome, and nephrosis 46,448
10. Septicemia

Factors Influencing Young Adult Women (18 to 35 Years) Health

The majority of health concerns for many of these women are related to eating disorders, reproductive health and sexually transmitted infections (STIs), physical activity, mental health and mood disorders, and substance use.

Factors Influencing Young Adult Women (35 to 65 Years) health

- Menopause and Hormone Replacement Therapy
- Osteoporosis
- Heart Disease
- Cancer
- Chronic Fatigue and Immune Dysfunction Syndrome

Factors Influencing Young Adult Men's (18 to 35 Years) Health

- Human Immunodeficiency Virus and Men
- Testicular Cancer
- Factors Influencing Young Adult Men (35 to 65 Years) health
- Reproductive Health
- Heart Disease
- Prostate Health

Community Health Nurses Role

Community health nurses role should use the three levels of prevention to promote health across the lifespan.

Primary prevention

- Primary prevention activities focus on education to promote a healthy lifestyle. Much of the community health nurse's time is spent in the educator role. When working with individuals, the community health nurse should encourage routine health examinations, healthy eating habits, adequate sleep, moderate drinking, and no smoking.

Community Health Nurses Role

Secondary prevention focuses on screening for early detection and prompt treatment of diseases. The community health nurse's role at this stage is to assess needs, plan, implement, or evaluate programs that focus on the early detection of diseases and to educate clients to prevent further damage from or spread of disease.

Type of Screening	Recommendation
Alcohol misuse & Tobacco use, Obesity, Hypertension, Diabetes, Lipid disorders	All adult
HIV infection, Syphilis	Adult at risk
Depression	Adult in practice settings where follow-up is available
Colorectal cancer	adult 50 to 75 years of age
Iron deficiency anemia ,Rh incompatibility and Bacteruria.	Pregnant women
Abdominal aortic aneurysm	One time for men aged 65 to 75 years who have ever smoked tobacco
Osteoporosis	Women over 65 years of age and those with fracture risk
Cervical cancer	Pap smear every 3 years age 21 to 65 years
Breast cancer	annual mammography for women aged 40 to 75 And women at risk should make mammography before this age.

Community Health Nurses Role

Tertiary prevention focuses on rehabilitation and prevention of further damage to an already compromised system. At this level of prevention, the nurse focuses on maintaining quality of life

Care of Elderly

- **Agism:** discrimination based on chronological age or appearance of age.
- **Aging:** complex set of physical, emotional, and social changes that increased risk for health problems and functional decline.
- Geriatrics is the medical specialty that deals with the health and social care of the older adult.

Care of Elderly

- **An elderly person** is a person 60 years of age or older who is suffering from infirmities of aging as manifested by organic brain damage, mental, physical & emotional dysfunction.

Diseases Common in Old Age

- Alzheimer's Disease
- Arthritis
- Cardiovascular disease
- Depression
- Diabetes mellitus
- Osteoporosis

Health Needs of Elderly

- Nutrition and Oral Health Needs
- Exercise Needs
- Sleep
- Economic Security Needs, Poverty
- Psychosocial Needs
- Spiritual Needs
- Safety Needs

Community Health Nurses Role

Community health nurses should use the three levels of prevention to promote health across the lifespan.

Levels of Prevention

- **Primary prevention** activities involve those actions that keep one healthy. Such primary prevention activities as health education, follow-through of sound personal health practices (e.g., flossing, seat belt use, exercise), recommended routine screenings, and maintenance of an appropriate immunization schedule ensure that older adults are doing all that they can to maintain their health.

Community Health Nurses Role

Secondary prevention focuses on early detection of disease and prompt intervention

Adult Health Screenings and Immunizations Schedule

Test	Who is needs it	How often
General health Height Weight Physical examination	All adult	Every year
Heart Health Blood pressure Cholesterol Diet review Diabetes HgA1C	All adult All adult All adult All adult	Every year At least every 2 year Ask your doctors Every 3 year
Cancer Breast Clinical breast examination Mammogram	All adult women starting at 40 After age 50 Every year	Every year Every year
Cervical Pap test Pelvic exam	All women All women	Every 1-3 yrs Ask your doctors
Prostate Digital rectal examination Colorectal Fecal occult blood	All men over 50 Adults starting at 50	Every year Every year

Community Health Nurses Role

Bone health Bone mass density	Starting at 65	Ask your doctors
Sensory Hearing Vision Glaucoma	All adults All adults Adults over age 65	Every 1–2 yrs. Every 1–2 yrs. Every 1–2 yrs
Behavioral Depression Obesity Tobacco use Alcohol use	All adults All adults All adults All adults	Discuss with your doctor
STIs and HIV HIV	Both partners	Discuss with your doctor

Community Health Nurses Role

Tertiary Prevention: Tertiary prevention involves follow-up and rehabilitation after a disease or condition has occurred or been diagnosed and initial treatment has begun.

Questions:

- What is the ten leading causes of death for all people in rank order?
- What is Role of the CH nurse in elderly health:

Maternal and Child Health Care Services

Dr. Noora Hama Karim

Outlines:

- **Definition**
- **Objectives of MCH services**
- **Types of MCH services**

Maternal and Child Health (MCH)

- **MHC:** Caring for women, child, & family for the purpose of promotion & maintenance of optimal family health to ensure cycle of childbearing & of childrearing.
- **Maternal and child health (MCH) programs** focus on health issues concerning women, children and families, such as access to recommended prenatal and well-child care, infant and maternal mortality prevention, maternal and child mental health, newborn screening, child immunizations, child nutrition and services for children with special health care needs. States invest in healthy children and families to strengthen communities and avoid unnecessary health care costs

Key problems facing this population.

- Infant Mortality
- HIV/AIDS
- Birth Weight and Preterm Birth
- Adolescent Mothers

Objectives of MCH program

- Prevent communicable and non-communicable diseases.
- To identify high risk cases so that can give them special attention.
- To give expert advice to the couples to plan their families.
- Health education regarding safe practices during pregnancy, labor & puerperium
- To provide health supervision for antenatal mothers
- Encourage the deliveries by trained workers in the safe and clean environment.

Risk Factors for Pregnant Women and Infant:

- Substance Use and Abuse
- Alcohol Use
- Tobacco Use
- Intimate Partner Violence
- Sexually Transmitted Infections
- HIV and AIDS
- Poor Nutrition, Weight Gain, and Oral Health
- Socioeconomic Status and Social Inequality
- Adolescent Pregnancy

Maternal and Child Health

- **Antenatal care:** It means the care to pregnant women from conception through the 3 trimesters of pregnancy.

Aim of Antenatal care:

- To maintain health of pregnant woman and their fetuses.
- Delivery with minimum injury to the infant & mother.
- Detect & treat appropriately infectious diseases of birth canal
- Effective transportation to a referral facility
- Readiness to deal with complications of pregnancy such as prolonged labor, antepartum hemorrhage.
-

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Maternal and Child Health

Role of the nurse in antenatal care:

CHN should inspect perineum for any laceration or tearing, watch for bleeding.

- Perineum care
- Clean the Perineum
- Place the perineum comfortably on the bed after delivery
- Provide some hot drink (coffee, tea).

Maternal and Child Health

- **Intranatal care:** care provided to the pregnant woman throughout the labor stages to have safe & sound delivery.

Objective: to ensure a safe delivery outcome in form of healthy mothers & healthy babies.

Maternal and Child Health

Post-natal Care

Care of the mother & the newborn after delivery.

Objectives of Post-natal Care:

- To prevent complications of the post-partal period
- To provide care for the rapid restoration of the mother to optimum health
- To check adequacy of breast feeding
- To provide family planning services
- Immunization of the child
- Nutritional guidance for the mothers
- Postnatal Exercise
- Psychological Assistance
- Basic Health Education to mother/family Hygiene (personal & environmental), feeding of mother & infant, pregnancy spacing, health-checkups importance, birth registration

Maternal and Child Health

Role of the nurse in Post-natal Care:

- Observe the sleep, diet pattern of mother.
- Check vital signs, inspect the perineum for discharge, inspect the breast and nipples.
- Care of the newborn involves taking body temperature, checking skin, color, eyes, bowel movement, urination.
- Checking the newborn for sleeping and feeding.

Maternal and Child Health

Role of the nurse for Child care:

- Health assessment & growth monitoring
- Immunization services
- School health services
- Special health program such as ORT oral rehydration therapy, URI upper respiratory infection management

Health Services For Infants , Toddlers, and Preschoolers

- **Preventive Health Programs** :parenting education, health and safety education, immunizations, various screening programs, and family planning services.
- Three examples of preventive health programs for infants and young children are:
 - immunization programs
 - parent training programs
 - quality day care services

Health Services For Infants , Toddlers, and Preschoolers

- **Health Protection Programs:**

Health protection programs for infants and young children are designed to protect them from illness and injury.

- Safety and Injury Protection
- Protection From Child Abuse and Neglect

Health Services For Infants , Toddlers, and Preschoolers

Health Promotion Programs:

- Infant Brain Development Research and Parent–Child Interactions
- Developmental Screening
- Programs for Children with Special Needs
- Nutritional Programs

Questions:

- **What is the Objectives of MCH program?**
- **What is the role of nurse in Post-natal Care:**

School Health Care Nursing

Dr. Noora Hama Karim

Outlines:

- **Definitions: school, school age children, school health care nursing**
- **school health care program**
- **component of school health program**
- **the school health team**
- **the roles of Nurse in the school health setting**

School Health Care Nursing

A school is an educational institution that provides learning services to school age children.

School age children are classified into three categories:

1. Early school age (6-7) years old.
2. School age (8-12) years old.
3. Late school age (adolescence) (13-18) years.

Health problems of School age children:

- **Chronic disease**

- Diabetes
- Asthma
- Autism spectrum disorders (ASDs)
- Juvenile rheumatoid arthritis
- Seizure disorders
- cancers

- **Behavioral and Learning Problems**

- Learning Disabilities
- Attention deficit hyperactivity disorder (ADHD)

- **Behavioral and Emotional Problems**

- Disabled Children

Health problems of School age children:

- **Problems Associated with Economic Status**
 - Injuries
 - Communicable diseases
 - Head Lice
- **Other Health Problems**
 - Nutritional problems—**anemia or obesity/ overweight**
 - poor dental health.

School Health Nursing:

- **School Health Nursing:** A specialty in CHN which is concerned with the delivery of comprehensive nursing care to the students, School staff and their families whole to meet their needs and solve their problems through the application of nursing process to promote health and prevent illness.
- **School health program:** All strategies, activities, and services offered by, in, or association with schools that are designed to promote students' physical, psychological and social development.
- **Objectives:** health promotion & disease prevention for students & teachers.
- Rehabilitation of handicapped students

Component of School Health Programs:

- **Health Services:** It includes the following activities:

1.1. Health Assessment and Screening:	<ul style="list-style-type: none">-Preschool entry assessment-Routine screening- Monitoring chronic conditions and treatment effects
1.2. Case Finding:	<ul style="list-style-type: none">-Identification of communicable & chronic diseases-Referral for diagnostic and treatment services- Surveillance for selected health events
1.3. Counseling:	<ul style="list-style-type: none">-Counseling regarding exiting health problems-Anticipatory counseling for students, parents and staff
1.4. Health Promotion/Diseases Prevention;	<ul style="list-style-type: none">- Immunization of unimmunized /staff health teaching in and outside of classroom- Health promotion activities for students/staff e.g. smoking cessation, weight control

1.5. Case management

- Referral to outside services as needed
- Follow-up on referrals
- Arranging transportation

1.6. Remedial/rehabilitative services

- Speech therapy, -Physical therapy, -Behavioral modification

1.8. Emergency Care

- Development of emergency protocols
- First aid services
- Post emergency assessment

Component of School Health Programs:

2. Health Education: The process of presentation of information to the students and the school staff regarding health promotion and diseases prevention.

3. Environmental Health:

It involves assessment for the physical and psychosocial factors in the environment.

-Physical environment:

-Toxic agent & Infectious agent control,

-Accidents injury controls.

-Psychosocial environment: - Internal factors and external factors.

Application of the Nursing Process in the School Setting:

- **Assessing** health in school setting: Assessing the needs of the school population and identifying the factors influencing those needs taking in consideration dimensions of health.
- **Nursing Diagnosis in the School Setting:** According to the assessment data nursing diagnosis is derived. E.g. need for drug abuse education due to high prevalence of drug abuse in the surrounding community.
- **Planning Health Care in the School Setting:** Planning to meet the health needs identified take place in two levels: Macro & level planning
- **Implementation in the School Setting:** Implementing health care for the school's member who involves collaboration between the nurse and other members of the school health team.
- **Evaluation Health Care in the School Setting.**

Questions:

- **What is the Health problems of School age children?**
- **What is the roles of Nurse in the school health setting?**

Nutrition Health Services

Dr. Noora Hama Karim

Outlines:

- Definitions: nutrition, food, diet
- Process of nutrition
- Classification of nutrients
- Importance of good nutrition
- Factors affecting community nutrition
- Roles of Community Health Nursing in nutrition services

Nutrition

- **Nutrition:** The combination of processes by which the living organism receives and utilizes the nutrient from food for the maintenance of its functions , the growth of tissues and for production of energy.
- **These combinations are:-**Eating -Digestion.-Absorption.-Metabolism.-Excretion and Egestion
- **Diet:** An element that is used in many tradition treatments of disease or food prescribed a physician.
- **Food:** are nourish the body and sometimes to treat particular illnesses for which dietary has an accepted scientific rationale.

Nutrition

- **Classification of food:**

- Energy food.
- Body building food.
- Protective foods.

- **Classification of nutrients:**

- Macro N (Carbohydrates Proteins, Fats).
- Micro N (Minerals, Vitamins & Water).

Good Nutrition is Important for:

- The ability of adults to work well.
- The bodies' resistance to infectious disease.
- Healthy pregnancy and deliveries.
- Physical and mental development of children and adolescent.
- Eradication of malnutrition diseases.

Factors' Affecting Community Nutrition:

- **Good agriculture:**
 - Clearing the land.
 - Planting of sufficient crops.
 - Use of irrigation and fertilizer.
 - Harvesting of the right time.
 - Safe storage of the food.
 - Good transport and distribution system to get enough food for all regions.
- **Healthy environment:**
 - Safe and sufficient water, essential water for drinking, cooking, e.t.c...
 - Safe and not too farway from houses.
 - Vectors and disease control.
 - Raising of the general standard of sanitation.
 - Improved housing.

Factors' Affecting Community Nutrition:

3. Good Economy:

- Sufficient money and resources wisely allocated.
- Enough cultivable land to grow sufficient crops.
- Enough productive jobs and hard work.

4. Good Education:

- Spreading of knowledge about good nutrition and child health in school, families and community.
- Should ways of improving present attitudes and
- practices, special emphasis/ should be laid on education nutrition of the vulnerable groups (child, pregnancies and patients).

Factors' Affecting Community Nutrition:

5. Healthy and social family life:

- Family size.
- Appropriate distribution of money, work and food within the community and family.
- Care of children from broken or incomplete family.

6. Prevention and control of disease

- Infectious disease can cause malnutrition in children.
- Early detection and effective treatment of acute disease in adults.
- Good management of chronic disease in adults.
- Control of alcoholism to avoid waste of money and man power.

Roles of Community Health Nursing in Nutrition Services:

- Encourage breast feeding until after weaning.
- Emphasize the nutritional values of many local and traditional foods.
- Identify the food values of locally grown foods and encourage their production and use.
- Advice on the storage and preservation of local foods.
- Organize nutrition education.

Questions

- What is the Importance of good nutrition?
- Explain the Roles of Community Health Nursing in nutrition services

Occupational Health Care Nursing

Dr. Noora Hama Karim

Outlines:

- **Definitions of Occupational Health and Occupational Health nursing**
- **Objectives of Occupational Health care nursing**
- **Work health interaction**
- **Role of Occupational Health care nurse**

Occupational Health

- **Occupational health:** deals with all aspects of health & safety in the workplace & has a strong focus on identification & control of risk arising from (physical, chemical, psychological..) and primary prevention of hazards to maintain a safe & healthy working environment.
- **Occupational health nurse:** are registered nurses who observe & assess the workers' health status with respect to job task & hazards.

Occupational Health Program Services Offered:

1. Health risk appraisal and assessments for research animal work and identified lab safety programs and other university programs that involve higher risk work and activities
2. Health risk counselling for allergies, ergonomics, reproductive, and immune status issues that may impact your job functions
3. Medical clearance and fit testing for job required respiratory protection
4. Job specific TB screening
5. Job specific vaccinations
6. Job specific drug testing

Occupational Health Program Services Offered:

7. Treatment of minor work-related injuries and illnesses

8. Case management for complex work-related injuries and illnesses including post-exposure follow-up

9. Fitness for duty consultations where a medical condition may present a serious safety risk

Health workers:

A **health care facility** is a work place as well as a place for Receiving and giving care .Health care facilities around the world Employ over 59 million workers who are exposed to a complex Variety of health and safety hazards every day including:

- 1-Biological hazards**, such as TB, Hepatitis, HIV/AIDS, SARS;
- 2-Chemical hazards**, such as ,glutaraldehyde ,ethylene oxide;
- 3-Physical hazards**, such as noise, radiation, slips trips and falls;
- 4-Ergonomic hazards**, such as heavy lifting;
- 5-Psychosocial hazards**, such as shift work, violence and stress;
- 6-Fire and explosion hazards**, such as using oxygen, alcohol sanitizing gels;
- 7-Electrical hazards**, such as frayed electrical cords.

Occupational and Work-related Diseases

- An “occupational disease “is any disease contracted primarily as result of an exposure to risk factors arising from work activity.
- “Work-related diseases” have multiple causes, where factors in the Work environment may play a role, together with other risk factors, in the development of such diseases.
- The WHO Global Plan of Action on Workers’ Health called for Improving the diagnosis, reporting and registration of occupational Diseases and building capacities for estimating the occupational Burden of diseases

WHO' s Activities Regarding Occupational and Work-related Diseases Include:

1-Carrying our estimates of the global burden of disease from Major occupational risks, such as injuries ,airborne exposures, carcinogens, ergonomic stressors ,noise and other specific risks.

2-Incorporating occupational diseases and their causes in the 11th revision of the International Statistical Classification of Diseases and Related Health Problems.

3-Working with ILO to develop diagnostic and exposure criteria for Occupational diseases and to enable primary and secondary Health care providers to detect and report such diseases.

Occupational Health Nurse Activities:

- Identification of abnormalities.
- Management of occupational & non-occupational illness & injury.
- Documentation of the illness & injury
- Observation & assessment of both work & work environment.
- Appraisal of the work environment for potential exposures.
- Description of worker response to the exposures
- Interpretation & evaluation of worker medical & occupational history.
- Interpretation of medical diagnosis to workers.

Levels of Health Care in the Occupational Setting:

- **Primary prevention:**

- illness & injury prevention, health promotion, awareness programs,
- Motivation programs, behavior change programs

- **Secondary prevention:** screening & surveillance, pre-employment screening & periodic screening, Environmental screening, treatment of existing conditions, emergency care

-

- **Tertiary prevention:**

- preventing the spread of communicable diseases,
- Preventing recurrence of acute conditions,
- Preventing complications of acute & chronic condition,
- Rehabilitation.

Questions:

- What is the occupational hazards:
- What is the role of occupational health care nurse

Home Visits

Dr. Noora Hama Karim

Home Visits

- Definition
- Purposes of **Home visits**
- **The home visit process**
- **Advantages of home visit**
-

Home Visit

Home visit: is a formal interaction between nurse and a client at the clients place of residence (home & in patient setting) for providing nursing care related to an identified health need.

The advantages of Home Visits Include:

- To establish relationship with family members
- Obtaining a complete picture of the client situation
- Identification of environmental influences on health
- Opportunity to see actual performance of activities of daily living
- Allow for better assessment of both strengths and needs
- To find out the health problems
- To guide and counsel the family related to various health problems
- To provide nursing care

Components of the Home Visit Process

Initiation	Schedule the home visit with the client, introducing the home visitor and explaining the purpose of the home visit.
Preliminary assessment	Review available client data to determine health care needs related to biological, psychological, environmental, sociocultural, behavioral, and health system determinants of health.
Diagnosis	Develop diagnostic hypotheses based on preliminary assessment.
Planning	<p>Review previous interventions and their effects.</p> <p>Prioritize client needs and identify those to be addressed during the visit.</p> <p>Develop goals and objectives for visit and identify levels of health care involved.</p> <p>Consider client acceptance and timing of visit.</p> <p>Identify appropriate nursing interventions to address problems.</p> <p>Obtain needed supplies and equipment.</p> <p>Plan for evaluation of the home visit.</p>

Components of the Home Visit Process

Implementation	<p>Validate preliminary assessment and nursing diagnostic hypotheses.</p> <p>Identify other client needs.</p> <p>Engage in mutual goal setting with client to meet identified needs.</p> <p>Modify plan of care as needed.</p> <p>Carry out nursing interventions.</p> <p>Deal with distractions.</p>
Evaluation	<p>Evaluate client response to interventions.</p> <p>Evaluate short-term and long-term outcomes of intervention.</p> <p>Evaluate the quality of planning and implementation of the home visit.</p> <p>Evaluate outcomes and quality of care at the aggregate as well as individual levels</p>

Components of the Home Visit Process

Documentation	<p>Document client assessment, health needs identified, and goals established.</p> <p>Document interventions.</p> <p>Document client response to interventions.</p> <p>Document outcome of interventions.</p> <p>Document future plan of care.</p> <p>Document client health status at discharge.</p>
Termination	<p>Plan for termination from the first visit.</p> <p>Inform client of the time-limited nature of services and their probable duration.</p> <p>Review goal accomplishment with the client.</p> <p>Make referrals for continuing care, if needed.</p>

Questions:

- **Explain home visit process**
- **Numerate the Advantages of home visit**

Home Health Care Nursing

Dr. Noora Hama Karim

Outlines:

- Definitions of Home health and Home health care nursing
- Team members of Home health care services
- Types of clients in Home health care services
- Roles of the Community Health nurse in the home health care

Home Health Care

Home Health Care is defined as “an array of services for people of all ages, provided in the home and community setting, that encompasses health promotion and teaching, curative intervention, end-of-life care, rehabilitation, support and maintenance, social adaptation, and integration and support for the informal (family) caregiver”

Home health nursing is characterized by holism, care management, resource coordination, collaboration, and both autonomous and interdependent practice.

Example of Skilled Home Health Services Include:

- **Wound care for pressure sores or a surgical wound**
- **Patient and care giver education**
- **Intravenous or nutrition therapy**
- **Injections**
- **Monitoring serious illness and unstable health status**

Types of clients in home health care services:

Clients with:

- Total joint replacements
- Fractures
- CVA//stroke
- Fall risk
- Chronic pain
- Dementia
- Wounds
- Incontinence
- Heart failure
- Progressive neurological conditions

Team members of home healthcare services:

- Physicians
- Nurse,
- Social workers
- Speech therapist's
- Occupational therapists,
- Physical therapist's
- Pharmacist's
- Psychologist
- Dentists
- Rehabilitation personnel
- Dietician
- Optometrist
- Volunteer
- Friend and family caregiver.

Community Oriented Home Health Care:

- **Attention**
- **Compassion**
- **and rehabilitation**

Role of Community Health Nurse in The Home Health Care:

- Evaluation patient health
- Creating or collaborating with a care team on an individual treatment plan
- Providing basic hygiene needs
- Cleaning and dressing wounds
- Monitoring and documenting vital signs
- Updating care plan and noting changes in conditions
- Providing education to patient and their caretakers regarding medical needs and support
- Responding to emergent situations
- Reviewing home safety
- Supervising aides that are in the home providing care
- Communicating with physicians and the rest of the care team

The Effective Home Health Nurse Must:

- Deliberately build trust
- Sense “where people are” and suspend judgment
- Develop a connection at the first visit
- Develop “giant antennae” to detect cues in the home
- Face persistent distractions during home visits
- Help people solve their own problems
- Keep priorities fluid
- Determine how to keep the unstable client safe until the next visit
- Thoughtfully maintain boundaries between personal and professional life
- “Make do” with limited supplies
- Face immense challenges with time management and paperwork demands
- Constantly think of personal safety in neighborhoods and homes

Home Health Team

- **The largest number of home care employees** are nurses and home care aides (NAHC, 2010). Registered nurses and licensed practical nurses represent just under half of full time equivalent (FTE) positions in Medicare-certified agencies. Home care aides, physical therapy staff, occupational therapists, social workers, and administrative personnel comprise the rest of the home health team.
- The business and office personnel of a home health agency are critical to the agency's ability to deliver services to clients. Home health nurses must acquire an understanding of the financial aspects of their clients' care and provide this information to the agency staff, so that appropriate and full reimbursement can be obtained for the services provided.

Questions:

- Numerate the Types of clients in Home health care services
- What is the Roles of the Community Health nurse in the home health care

Environmental Health and Safety Services

Dr. Noora Hama Karim

Outlines:

- **Definitions: Environment, Environment health**
- **Elements of the Environment health**
- **Major global Environment concerns**

Environmental Health

Environment—the conditions within which we live and work, including the quality of our air, water, food, and working conditions—strongly influence our health status.

Consequently, the study of environmental health has tremendous meaning for community health nurses.

Environmental Health: It is science and act of controlling upon all external surroundings or influences that affect the human being's health.

Environmental health is defined by the (WHO) as:

‘Environmental health comprises of those aspects of human health, including quality of life, that are determined by physical, biological, social and psychosocial factors in the environment

Goals of Environmental Health:-

1. To eliminate the level of environmental hazards that affect the health of human's being.
2. To make balance relationship between man and his environment.
3. To increase the adaptation of man to his total environmental influences

WHO classified Environmental Health Components to the Following

1. Safety housing.

2. Food hygiene and protection.

3. Control of air pollution.

4. Provision of safe, adequate, potable water supply system.

5. Provision of safe waste disposing system. (Industrial & Individual) waste.

6. Control of reservoirs (animals).

7. Control of insects and rodents.

8. Control of environmental hazards:

- Noise control.
- Radiation control.
- Toxic substances control.
- Accidentals (road, home).

Factors Affecting Environmental Health

1. Chemical factors: It consists of dust, smoke, acids, base, poisons, Air pollution, Water pollution and many others.

Effects of Chemical and Gaseous Hazards:

- Poisonings and exposures to toxic substances
- Increased respiratory disease
- Increased cancer incidence
- Multiple other biophysical effects

Factors Affecting Environmental Health

2. Biological factors: These consist of living things that have a number of threats to people's wellbeing like Infectious organisms, Insects, animals and Plants

Effects of Biological Hazards:

- Communicable diseases
- Contact dermatitis
- Plant poisoning
- Insect and animal bites
- Diminished food supplies
- Increased exposure to allergens

Factors Affecting Environmental Health

3. Physical factors: they are mainly noise, vibration, temperature, radiations and many others.

Effects of Physical Hazards:

- Increased cancer incidence
- Increased incidence of cataracts
- Heavy metal poisoning
- Hearing loss
- Increased stress, insomnia, depression, etc.

Major Global Environmental Concerns

1. Overpopulation

- **Effects:** food scarcity, water shortages, depletion of other vital resources
- **Nurse's role:** teaching about birth spacing, preventing high-risk pregnancies, preventing growing epidemic of HIV/AIDS, providing family planning education, providing prenatal care

2. Air pollution

- One of the most hazardous sources of chemical contamination
- **Adverse effects** include costs to property, productivity, quality of life, and human life.
- **Certain geographic** areas more susceptible to ill effects due to weather or physical terrain

Major Global Environmental Concerns

3. Dusts, gases, and naturally occurring elements

- **Dusts:** silica dust, asbestos
- **Gases:** sulfur oxides, nitrogen oxides, chlorine, ozone, sulfur dioxide, carbon monoxide, radon, Pollen, volcanic ash, airborne microorganisms

4. Acid precipitation

- Air contaminants + precipitation = sulfuric and nitric acid (acid rain)
- **Effects:** killing small life forms; danger to forest and freshwater ecologies

5. Ozone depletion and global warming

- **Effects:** increased risk for skin cancer and cataracts; indirectly damaging food chain, increasing exposure to vector-borne diseases, raising ocean levels, and negative impact on crop production

Major Global Environmental Concerns

6. Water pollution

- Surface water (lakes, streams); underground sources
- **Effects:** cause of disease; contamination of streams, lakes, wells; contamination of fish; upset of ecosystem

7. Deforestation, wetlands destruction, and desertification

- **Effects:** upset of ecosystem; gases contribute to ozone depletion; geographic changes/landslides; drought, famine, starvation

8. Energy depletion

- Nonrenewable sources primarily used today; nuclear energy still controversial, including building of plants and disposal of nuclear waste

Major Global Environmental Concerns

9. **Unhealthy or contaminated food**

- Inherently harmful foods, contaminated foods, foods with toxic additives
- Food irradiation/cold pasteurization—for global food safety

10. **Waste disposal**

- Issues involving disposal of human waste, garbage, hazardous waste

11. **Insect and rodent control**

- **Effects:** irritation/discomfort; direct threat to health via attack; contamination of food; vectors for disease transmission (mosquitoes, flies, ticks, roaches, fleas, rats, mice, ground squirrels)

12. **Safety in home, worksite, and community**

- Exposure to toxic chemicals, radiation, noise pollution, biologic pollutants; injury hazards; psychological hazards

Questions:

- **What is the elements of the environment health**
- **Explain the Major Global Environmental Concerns**