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Maine Public Health Nursing Four Year Strategic Plan, January 2004

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Maine Department of Human Services

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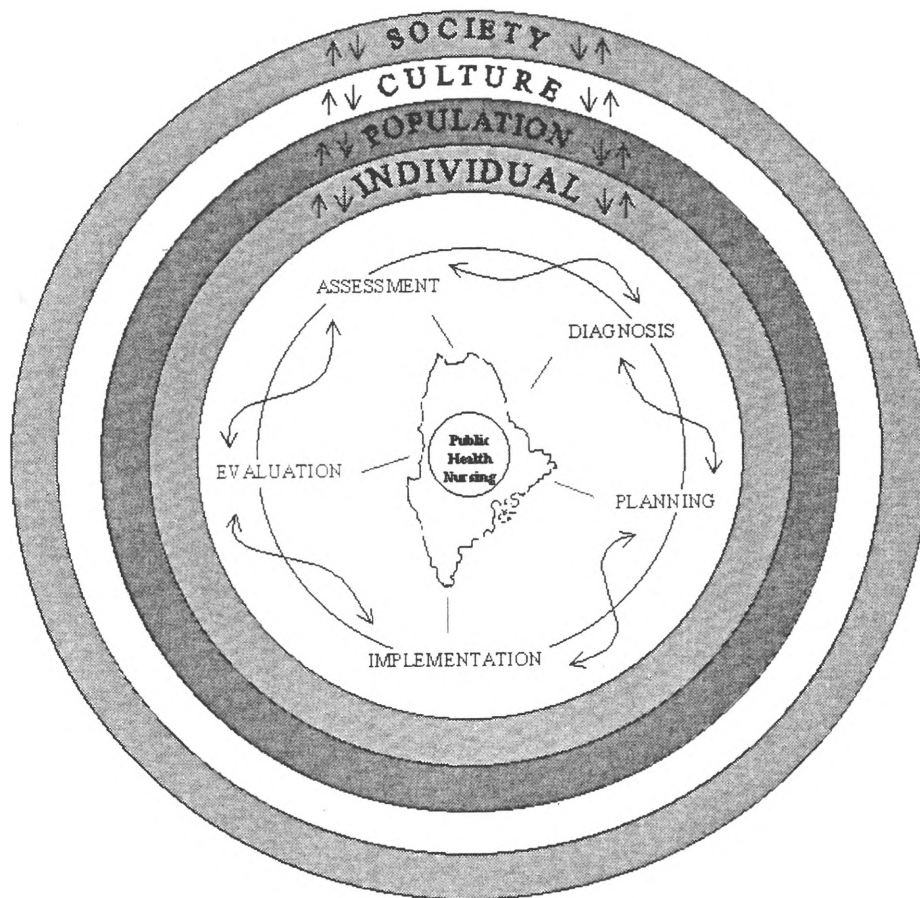
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DEPARTMENT OF HUMAN SERVICES
BUREAU OF HEALTH
DIVISION OF FAMILY HEALTH**



PUBLIC HEALTH NURSING



FOUR YEAR STRATEGIC PLAN

JANUARY 2004

SEP 30 2004

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Introduction

Public Health Nursing was created in 1920 to be known as the Division of Public Health Nursing and Child Hygiene in the Maine State Health Department. At that time two goals were identified:

1. To save lives of mothers and children through education of parents and the public, and to provide preventative and corrective services in cooperation with physicians and concerned others.
2. To set high standards for quality nursing work and to set high standards for nurse qualifications

As the program evolved the prevention and control of communicable diseases, as well as expanded services for Maternal and Child Health and the Crippled Children's Services, now known as The Children with Special Health Needs Program, were added. Public Health Nurses functioned as the field nurses for many of the Bureau of Health Programs and continue to do so today. Even though the program has continued to evolve, the essence of the original goals still exist as defined in the current law (Appendix):

1. Establish standards
2. Provide Information
3. Provide nursing services
4. Provide technical assistance

Over the past 84 years Public Health Nursing has been a vital component of the Bureau of Health as well as the overall public health system in the State of Maine. Public Health Nursing in Maine has defined its role as assessing health status, defining health options for individuals and populations, developing policies, and assuring access to services for individuals, families, and communities. This is accomplished by utilizing the nursing process of assessment, problem identification, planning, implementation and evaluation. Services have been and continue to be population based, with a goal of disease prevention and health promotion. The program is in a continual process of defining and redefining those services.

As the health care system continues to change, Public Health Nursing has refocused and strengthened the capacity of the work force to provide population based services as outlined in the Ten Essential Public Health Services (Appendix).

The previous Public Health Nursing Strategic Plan (2001) outlined three strategic issues. First was the development of a management information system. Public Health Nursing has completed a transition to a comprehensive data collection and documentation system that was implemented in the fall of 2002. The Public Health Nursing Carefacts Clinical Documentation System is based upon the Omaha System, a standardized nursing language. The Omaha System has become the framework for all Public Health Nursing services in Maine.

Second was staff retention and recruitment. Since the fall of 2001, the Public Health Nursing professional staff has been provided compensation comparable to nurses practicing in the State of Maine system. The Public Health Nursing Advisory Committee was not established, thus the work to address the Public Health Nursing career ladder and the various compensation levels was not addressed by that group. The Public Health Nursing administrative staff did explore this issue. In the State of Maine system, it is not feasible to address a career ladder for the Public Health Nursing staff. Incentives and/or compensations for Public Health Nursing staff to seek further education were not developed based on the same determination. Established system policies and budget constraints prevented Public Health Nursing from moving forward with this strategy. Public Health Nursing has collaborated with many of the Schools of Nursing in Maine to develop relationships that may lead to an increase in cooperative activities. The setting of standards regarding student experiences in community and public health nursing are yet to be developed. A competency based interviewing and hiring model has been developed and implemented for all new staff during their hiring process.

Third was the scope of Public Health Nursing practice. All of the Public Health Nursing staff has been provided documents and professional literature relating to the specialty of public health nursing. These documents have been reviewed with the Public Health Nursing professional staff and are readily available in each of the Public Health Nursing offices for ongoing reference. Public Health Nursing has continued to provide services that address the core public health functions while at the same time making adjustments that will allow for the delivery of quality services in a climate of fiscal and geographic constraints. Public Health Nursing has been able to assume new roles in response to emerging issues, especially in the areas of emergency preparedness.

This strategic plan outlines the major issues facing Public Health Nursing in Maine as well as strategies essential to addressing them. Strategic interventions must be developed and implemented in collaboration with other stakeholders within the public health and community health arena in an effort to refocus Public Health Nursing to responsibilities outlined in state statute. Together, we can accomplish the vision of Public Health Nurses as leaders in promoting healthy people in healthy communities through excellence in Public Health Nursing Practice.

PUBLIC HEALTH NURSING

Vision

Public Health Nursing: Leaders in assuring excellence in health.

Mission

Public Health Nursing provides expertise and leadership to improve the health of populations. Public Health Nursing accomplishes this by the following activities:

- Conducting Public Health Nursing standardized community assessments for use in determining Public Health Nursing interventions. Disseminating assessment data to other Bureau of Health and community programs.
- Case Finding for the purpose of locating individuals and families with identified risk factors, diseases, conditions, disorders, and connecting them with resources.
- Participating in research as an independent Public Health Nursing project or in cooperation with Bureau of Health and other state programs, with local community initiatives, or with other professional initiatives.
- Contributing to the ongoing research, review, and revision of the Omaha System, an international standardized nursing language
- Coordinating quality, affordable, and accessible resources for individuals, families and communities
- Advocating for community based initiatives
- Advocating for a safe and healthy environment
- Preventing and controlling epidemics
- Promoting healthy lifestyles
- Evaluating outcomes of public health services
- Participating in public health emergency preparedness activities
- Providing culturally appropriate health care services

Values

Public Health Nursing in Maine is based on the following values:

- The community, family and individual have a right to Public Health Nursing services, which are equally accessible, comprehensive, coordinated and participatory.
- The emphasis of Public Health Nursing practice is on assessment, health promotion and the prevention of illness and injury.
- The community, the family and the individual have the right to participate as active and equal partners with Public Health Nursing in promoting, maintaining, and restoring health.
- The community, the family and the individual have the right to Public Health Nursing services that meet or exceed established standards and that are creative, culturally competent and compassionate.
- The community, the family and the individual have the right to Public Health Nurses who are responsible for the adherence of professional nursing and public health standards by being accountable for the quality of their own practice, striving for excellence, ensuring that their knowledge is current and taking advantage of opportunities for life long learning.
- Communities, families, and individuals have the right to strive for their highest potential.

Assumptions

Public Health Nursing in Maine assumes the following:

- Technology, education, social values, demographics, and health care financing impact the individual, community and Public Health Nursing practice.
- The community, family, and individual are a composite of physical, psychological, social, cultural, developmental, and spiritual characteristics.
- Public Health Nurses incorporate research findings into their practice, participate in the research process, and identify nursing problems that lend themselves to research investigation.
- Public Health Nurses are proactive with respect to social and health care trends, changing needs, policies and legislation that impact on the health of communities, families, and individuals and/or the health care system.
- Public Health Nursing participates in an ongoing process to ensure that services are delivered in the most effective and efficient manner.

STRATEGIC DIRECTIONS

Strategic directions define organizational priorities, provide continuity, and create the focus for Public Health Nursing (PHN) in Maine. Having Strategic Directions assists the PHN leadership in developing and allocating limited resources (i.e. funding and staffing). Public Health Nursing will continue to have at its center a focus upon the core functions of public health: assessment, assurance, and policy development.

Strategic planning, specifically the development of strategic directions, assists the Public Health Nursing Program to respond effectively to the ever-changing environment of health needs and circumstances in Maine. The directions will enhance Public Health Nursing's ability to think and act strategically and to formulate and resolve important current and emerging issues. Strategic directions will allow the Public Health Nursing Program to build on its strengths and to take advantage of opportunities, while at the same time minimizing weaknesses and threats to the program. Overall the Public Health Nursing Program will be more effective to individuals, families and communities in Maine.

The following impacts Public Health Nursing in Maine:

- Staff attrition
- A lack of formal education and orientation to the specialty of public health nursing and to core public health functions
- Ongoing requests from Bureau of Health programs as well as from private agencies to provide direct services to individuals, families and communities
- The increased needs for services for identified populations
- The need for Public Health Nursing to proactively seek collaboration with community stakeholders beginning with the establishment of a Public Health Nursing Advisory Committee
- The necessity for community assessments utilizing the nursing process
- Limited financial resources
- The reconfiguration of the Public Health Nursing units based on demographic shifts
- A wide geographic coverage area
- The mandated Health Insurance Portability and Accessibility Act (HIPAA) regulations
- Advancing technology with a lack of a technical support system

- The need to increase public awareness and knowledge of Public Health Nursing in Maine.
- The effects the merger of the Department of Human Services and the Department of Behavioral and Developmental Services
- The challenges for a professional nursing staff to assume individual responsibility for achieving and maintaining professional practice standards in nursing and in public health practice
- Expanding roles in preventative health as it relates to the *Healthy Maine 2010*
- The expanding diversity of the population in Maine
- The expansion of contracted services provided by Public Health Nursing
- The expansion of early child home visitation services by other providers
- An expanding focus on state, national, and world threats
- The increased impact of client behavior related to substance abuse, mental health issues, violent behaviors, etc.
- Change in homecare regulations that impact the chronically ill population

STRATEGIC ISSUE: Scope of Public Health Nursing Practice

Public Health Nursing practice is based upon interventions. These interventions are defined as actions that public health nurses take on behalf of individuals, families, systems, and communities to improve or protect health status. Public Health Nursing interventions are unique in that they meet the following criteria:

- Based on community need
- Focused on populations at risk
- Address broad determinates of health
- Are preventative in nature

Levels of practice are individual and family, community, and systems focused. Public Health Nursing interventions are independent nursing functions with the exception of those interventions requiring orders from other health care providers. Public Health Nursing Services can be delivered to an individual who has been identified as being part of an at risk population. The PHN core functions are carried out through activities and interventions based on community need. The Public Health Core Functions are:

- Assessment
- Policy development
- Assurance

The goal of *Healthy Maine 2010* is to ensure an increase in quality and years of healthy life and the elimination of health disparities in Maine. The *Healthy Maine 2010* initiatives and related objectives support the strategies and activities of this strategic plan. Public Health Nursing understands and supports that health is a cycle of events that both impacts and is impacted and influenced by social factors here in Maine and elsewhere. As noted in *Healthy Maine 2010*: "Our systems of health, economy, environment, education, infrastructures such as transportation, and politics are all systems that cover a society like fibers of a blanket. When one fiber is unraveled or torn, the other fibers are also affected."

Public Health Nursing will continue to work towards maximizing the overall health of individuals with the resources available, while at the same time seeking and advocating for improved resources. Public Health Nursing adheres to the public health approach in addressing health issues with the:

- Identification of risk factors
- Identification of at risk populations
- Addressing of risk factors
- Assessment of interventions
- Identification and addressing of high priority areas
- Assuring the quality of service delivery
- Measuring the outcomes of Public Health Nursing interventions

Although clinical nursing practices focus on individuals, are illness driven and tend to work at a tertiary prevention level, the specialty of public health nursing traditionally focuses on populations, is prevention driven and works at the primary and the secondary prevention level. Public Health Nursing's goal is to assist people to develop strategies to live longer and healthier lives regardless of age, gender, income, or ethnicity. Public Health Nursing recognizes that this goal can only be accomplished in collaboration with other health care providers, populations and communities, and the individuals who comprise them. The challenge is to join others in addressing and meeting the *Healthy Maine 2010* health objectives, while at the same time being prepared to address the multitude of unexpected and/or unplanned public health emergencies that can and will face the people of Maine over the next four years.

Goal

The goal of Public Health Nursing is to promote health, identify and develop resources to positively impact the natural history of disease for people in Maine.

Objective

Interventions within the practice of Public Health Nursing will reflect the *Healthy Maine 2010* goals and objectives throughout this strategic planning period.

Strategy 1

Public Health Nursing services shall be provided in the following areas as primarily related to the *Healthy Maine 2010* objectives as noted:

➤ Adult/Elder Health

- Access to Quality Health Care, Disease Prevention and Health Promotion (Chapter 1)
- Chronic Disease (Chapter 2)
- Infectious Disease and Immunization (Chapter 5)
- Injury Prevention (Chapter 6)
- Mental Health (Chapter 7)
- Occupational Health (Chapter 8)
- Physical Activity and Nutrition (Chapter 9)
- Substance Abuse (Chapter 10)

- Children with Special Health Needs
 - Access to Quality Health Care, Disease Prevention and Health Promotion (Chapter 1)
 - Chronic Disease (Chapter 2)
 - Case management
 - Specialty clinic consultation and staffing
- Communicable Disease Prevention and Control
 - Infectious and Immunization (Chapter 5)
 - Immunization clinic consultation and support
 - Immunization clinics
 - Tuberculosis
 - Tuberculosis PPD Skin Testing training
- Community Health
 - Access to Quality Health Care, Disease Prevention and Health Promotion (Chapter 1)
 - Chronic Disease (Chapter 2)
 - Environmental Health (Chapter 3)
 - Mental Health (Chapter 7)
 - Occupational Health (Chapter 8)
 - Substance Abuse (Chapter 10)
 - Health fairs
 - Screenings, education, and resources
 - Assessments
 - Collaboration with groups, agencies, and schools of nursing
- Emergency Preparedness
 - Access to Quality Health Care, Disease Prevention and Health Promotion (Chapter 1)
 - Environmental Health (Chapter 3)
 - Infectious Disease and Immunization (Chapter 5)
 - Injury Prevention (Chapter 6)
 - Mental Health (Chapter 7)
 - Strategic National Stockpile
 - Disaster Health Training
- Identified Maternal Child Health Risks
 - Access to Quality Health Care, Disease Prevention and Health Promotion (Chapter 1)
 - Family Planning and Perinatal Health (Chapter 4)
 - Breastfeeding education and support
 - Infectious Disease and Immunization (Chapter 5)
 - Injury Prevention (Chapter 6)
 - Substance Abuse (Chapter 10)

- Infrastructure Building for Public Health Nursing
 - All Maine 2010 Health Objectives (Chapters 1 to 10)
 - Collaborations
 - Setting standards
 - Writing policies
 - Involvement with departmental and statewide initiatives
 - Utilization of human resources for priority needs
- Lead Poisoning Management
 - Access to Quality Health Care, Disease Prevention and Health Promotion (Chapter 1)
 - Environmental Health (Chapter 3)
- Migrant/Refugee Health
 - Access to Quality Health Care, Disease Prevention and Health Promotion (Chapter 1)
 - Infectious Disease and Immunization (Chapter 5)
 - Injury Prevention (Chapter 6)
- School Health
 - Chronic Disease (Chapter 2)
 - Infectious Disease and immunization (Chapter 5)
 - Injury Prevention (Chapter 6)
 - Physical Activity and Nutrition (Chapter 9)
 - Substance Abuse (Chapter 10)
- SIDS/Childhood Deaths
 - Access to Quality Health Care, Disease Prevention and Health Promotion (Chapter 1)
 - Injury Prevention (Chapter 6)
 - Mental Health (Chapter 7)

Activities

- Ongoing review of Public Health Nursing data to determine Public Health Nursing priorities
- Utilization of community assessment data to review and evaluate community needs
- Determine the direction of Public Health Nursing interventions in defined communities based on the community assessment data
- Development of a review process to determine the relevance of Public Health Nursing Interventions

- Consideration and acceptance of requests from other agencies and providers, both internal and external
- Consideration of Public Health Nursing staff input as to identify service needs in individual assigned geographic areas
- Consideration of Public Health Nursing staffing patterns and needs
- Ongoing analysis of Public Health Nursing human resource capacity
- Timely responsiveness to legal mandates
- Receive and consider recommendations from the Public Health Nursing Advisory Committee

Strategy 2

Public Health Nursing shall increase quality assurance activities.

Activities

- Based on the Ten Essential Public Health Services and the Core Public Health Functions, Public Health Nursing must develop infrastructure building services such as, but not limited to the following:
 - Assessing physician practices for immunization coverage rates
 - TB Skin Test Training Course
 - Child care infection control training
 - Vision, hearing and spinal screening
 - Denver II training
 - Training and screening programs in cooperation with other Bureau of Health programs.
- Continued refinement of internal quality improvement initiatives.

Strategy 3

Public Health Nursing shall develop strategies and initiatives to deliver services and create and develop interventions to identified populations in a group setting that will impact a greater number of individuals at one time and that will improve the utilization of Public Health Nursing resources both human and fiscal.

Activities

- Strategies and initiatives to be considered:
 - Accessing of services
 - Health promotion/education activities
 - Adult health
 - Specialty groups
 - Congregate living situations
- Develop strategies to support the delivery of services in group settings

STRATEGIC ISSUE: Public Health Nursing Advisory Committee

Public Health Nursing collaborates closely with many departments, divisions, programs, agencies and professionals. Public Health Nursing delivers services, contracts to do assessments and follow-up activities, enters into agreements and memorandums of understanding, partners in addressing health needs and addressing population based health issues, and participates on many boards, taskforces, and committees. Advisory committees are the most effective way to strengthen these partnerships. The strength of an advisory committee process is in the objective evaluation of a program as a whole.

Advisory boards/committees are authorized by the governing body to advise the organization on policies and to participate in the evaluation of all services. Advisory boards are composed of consumers, community leaders, and health professional, representative of the scope of services provided by the organization. Advisory committees are designed to allow members the opportunity to advise and to recommend directions and actions that add to the overall quality, effectiveness, efficiency and appropriateness of programs and services. An advisory committee can advise, assist, support and advocate. The role of the advisory committee is limited to those areas. Advisory committees do not set policy and do not make binding decisions on the organization.

The Public Health Nursing Program will benefit from the expert professional input of an advisory committee who can monitor the mission of the organization and can assist in articulating a current and future direction for the program. It will be important for the advisory committee to consider the history and past accomplishments of the Public Health Nursing Program, the current and future programmatic needs, and the present and emerging health needs of Maine's population. As the advisory committee works closely with the management team, the Public Health Nursing Program will be strengthened in the delivery of quality and expanded services in the State of Maine.

Goal

The Public Health Nursing Program will establish an advisory committee for the purpose of consultation, for the provision of recommendations and for collaboration with the Public Health Nursing leadership.

Objective

By October 2004, an advisory committee will be operational.

Strategy 1

Identify the scope of work for the Public Health Nursing Advisory Committee.

Activities

The Public Health Nursing Management Team will:

- Review documents of similar advisory committees from other programs within the Bureau of Health
- Develop the guiding principals for the Public Health Nursing Advisory Committee
- Utilized as a resource in the development process the Community Health Accreditation Program Standards (CHAPS)

Strategy 2

Identify and develop the membership of the Public Health Nursing Advisory Committee.

Activities

The Public Health Nursing Management Team will:

- Identify potential persons and/or entities for participation on the Public Health Nursing Advisory Committee. The membership shall also include a professional, who is not a regular member, on a rotation basis to be responsible for meeting facilitation and recording. Standing members will include the Director of the Public Health nursing Program and a representative of the Public Health Nursing management team.
- The following categories and/or entities of representation shall be considered for committee participation:

Outside the Bureau of Health

- Catholic Charities – Refugee and Immigration Services
- Child Development Services
- Coalition to end homelessness representative
- Consumer
- Discharge planning organization
- Emergency Preparedness
- Homeless shelter provider
- National Association of Mental Illness (NAMI)
- Home Health Alliance of Maine
- Primary health care provider
- Professional nursing organization

- Public Health Expert
- Schools of Nursing

Within State Government:

- Division of Disease Control
 - Department of Human Services fiscal specialist
 - Bureau of Medical Services
 - Bureau of Child and Family Services (or equivalent following the restructuring)
 - Department of Education – School Health Nursing
 - Emergency Preparedness
- Invite potential members for the Public Health Nursing Advisory Committee to participate on the committee by July 1, 2004.
- Develop term rotations and limits for the committee membership.

STRATEGIC ISSUE: The Promotion of Public Health Nursing

Public Health Nursing in Maine employs registered professional nurses working to improve, preserve and protect the health and the quality of life for all persons in the State of Maine. Public Health Nursing services are available to individuals, populations, cultures and communities on a confidential basis at no cost to the individual. Public Health Nursing strives to provide culturally competent and linguistically appropriate services. Public Health Nursing practices in a way that focuses on entire populations rather than just individuals, to monitor and diagnose the health concerns of entire communities for the purpose of promoting healthy practices and behaviors which will assure that populations stay healthy.

Public Health Nursing recognizes the importance of developing relationships and establishing collaborations with others at both the community and the state level. These relationships will ensure a better understanding of the scope of a public health nursing practice and how public health activities relate to the delivery of public health nursing services. These relationships will enhance the health and wellness of all persons through:

- Facilitating appropriate referrals
- Promoting a better understanding of the Public Health Nursing scope of practice, services provided, geographic areas covered, and related activities
- Improving the utilization of services to appropriately and efficiently:
 - Address gaps in services
 - Diminish duplication of efforts
 - Maximize available resources
 - Expand Public Health Nursing capacity
 - Enhance the health and wellness of the population

The Public Health Nursing Program has always been committed to working in an environment that supports the roles of assessment, surveillance, policy development, leadership, health promotion, and disease and injury prevention. The program has always promoted staff development that enhances the assessment, communication, leadership and management skills of all staff members. For Public Health Nursing in Maine to continue to be standard setters and leaders not only in nursing but in public health, the program must promote itself both within and outside of community and state agencies, and other disciplines.

Goal

The Public Health Nursing Program will promote and define the roles of Public Health Nursing in Maine to the Public Health Nursing staff, the community and the stakeholders.

Objective

Education and marketing activities shall be in place by July 2006.

Strategy 1

Provide staff education as to the specialty of public health nursing and to the Public Health Nursing Program in Maine by January 2005.

Activities:

- Prepare an educational program to include the following:
 - Core public health functions
 - American Public Health Association statement paper on Public Health Nursing
 - The American Nurses Association Standards of Care for Public Health Nursing
 - Other appropriate information and resources
- Encourage dialogue and discussion at the unit level regarding the scope of public health nursing practice
- Reactivate the Staff Development and Staff Education Committee with clear guidelines as to scope and purpose of work

Strategy 2

Create a marketing plan to highlight Public Health Nursing in Maine by July 2005.

Activities:

- Expand beyond the current Public Health Nursing resources to develop the marketing plan
- Explore the feasibility of Public Service Announcements
- Sponsor a Blaine House Tea to celebrate, recognize and honor Public Health Nursing in Maine

- Update the Public Health Nursing display to reflect the current brochure and the current Public Health Nursing initiatives in Maine
- Develop the Public Health Nursing Website
- Ensure Public Health Nursing representation at:
 - Statewide professional association meetings as appropriate
 - Regional and national events
 - Schools of Nursing and related events

Strategy 3

Public Health Nursing management will continue to enhance ongoing communication with the Public Health Nursing staff, both orally and in writing.

Activities

- Maintain open communication with the Public Health Nursing Staff
 - Annual reports
 - E-mails
 - Unit presentations: face-to-face and telecommunications
 - Staff development/educational activities

Strategy 4

Strengthen relationships with community partners and stakeholders beginning in January 2004.

Activities:

- Develop and promote representation on advisory boards, etc. at both the local and the state levels
- Train staff as to roles and the responsibilities of serving as a member of an advisory board
- Support, promote and provide fees for membership and participation in professional associations as official representatives of Public Health Nursing
- Ensure active participation by management and/or staff in statewide, community, and local initiatives such as:
 - Healthy Community Partnerships
 - Area Agencies on Aging
 - Child Development Services
 - Communities for Children
 - Dental Coalitions

- Early home visitation programs
- Formal meetings with:
 - Health officers
 - Town officials
 - Emergency management agencies
 - Headstart Community resource groups
 - Initiatives addressing local health needs and concerns
- Partnering in statewide initiatives addressing health concerns and issues

Strategy 5

Collaborate with Maine Schools of Nursing to develop strong relationships.

Activities

- The Public Health Nursing Advisory Committee will establish a task force who will collaborate with the Staff Development and Staff Education Committee, who will be responsible for the development of a student preceptor program within Public Health Nursing by January 2005.
- The Public Health Nursing Supervisors shall assign Public Health Nursing professional staff to students.
- Public Health Nursing Administration will develop and implement a plan for meeting annually with representative schools of nursing within the state of Maine (such as one meeting bringing representatives together) by September 2004 for the purpose of:
 - Exploring expanded preceptor experiences
 - Discussing opportunities for management team and staff members to do onsite class presentations
 - Develop a standardized experience for the baccalaureate student who spends time with the Public Health Nursing program

Collaborate with schools of nursing in research projects

QUALITY ASSURANCE

The Public Health Nursing Program will monitor the progress of this Strategic Plan. The Public Health Nursing Management Team will review the plan annually each January. In January of 2006, possible mid-course adjustments to each Strategic Issue will be evaluated and implemented. If such adjustments become necessary, the Director of the Division of Family Health will be consulted for recommendations. The Director of the Bureau of Health and the Public Health Nursing professional staff will be advised of any adjustments. The final review process and the development of the next strategic plan will begin in the summer of 2007.

APPENDIX

CHAPTER 408
PUBLIC HEALTH NURSING

22 § 1961. Public Health Nursing Program

There is established within the Department of Human Services, Bureau of Health, the Public Health Nursing Program. [1995, c. 502, Pt. D, §2 (amd).]

Section History:

1977, c. 516 (NEW).

1995, c. 502, § D2 (AMD).

22 § 1962. Director

The Director of the Public Health Nursing Program must be licensed as a registered nurse in the State and shall have education and experience in community health nursing. [1995, c. 502, Pt. D, §3 (amd).]

Section History:

1985, c. 785, § B86 (AMD).

1977, c. 516 (NEW).

1995, c. 502, § D3 (AMD).

22 § 1963. Responsibilities of the Public Health Nursing Program

The Public Health Nursing Program has the following responsibilities: [1995, c. 502, Pt. D, §4 (amd).]

1. **Establish standards.** To establish standards for the following programs carried out by the department pursuant to state or federal laws or regulations:

A. Community nursing services in communicable diseases; [1977, c. 516 (new).]

B. Programs for promoting the health of mothers and children; and [1977, c. 516 (new).]

C. School health screening, to be done in cooperation with the Department of Education; [1995, c. 502, Pt. D, §4 (amd).]

[1995, c. 502, Pt. D, §4 (amd).]

2. **Information.** To inform community nursing agencies of the standards in subsection 1;

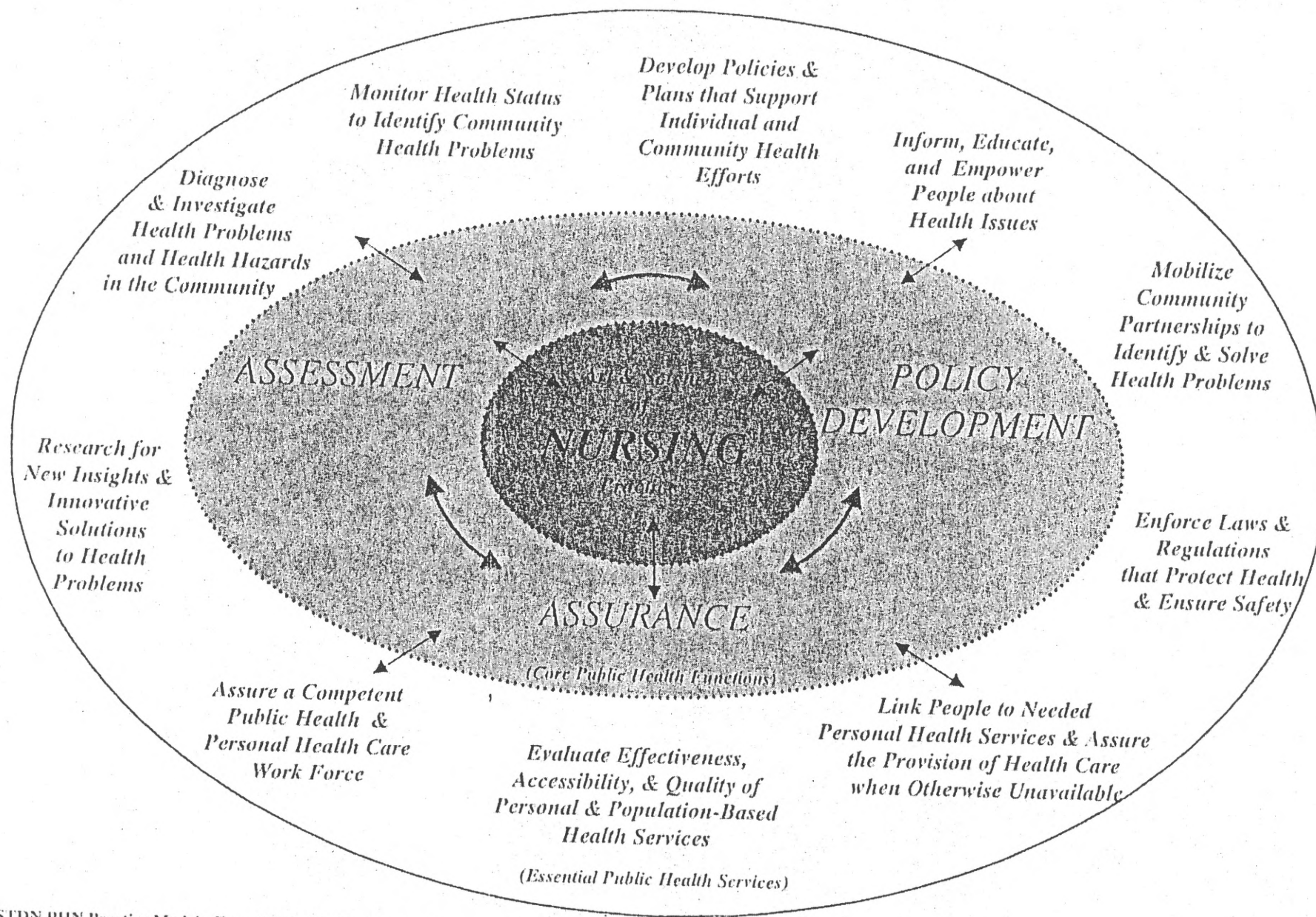
[1977, c. 516 (new).]

3. **Provide nursing services.** To provide, at the discretion of the director, nursing services in communities that lack these services or in which these services are inadequate according to established standards; and

[1995, c. 502, Pt. D, §4 (amd).]

4. **Provide technical assistance.** To provide technical assistance to school health nurses, prenatal clinics, community immunization clinics and child health conferences and groups seeking to establish clinics and conferences.

[1995, c. 502, Pt. D, §4 (amd).]



CORE PUBLIC HEALTH FUNCTIONS:

In 1988, the Institute of Medicine report, The Future of Public Health, conveyed the message that public health was in a state of "disarray" and recommended that public health agencies across the country concentrate on building their capacity to fulfill the core functions of assessment, policy development and assurance.

Assessment - Under this heading are all the activities involved in the concept of community diagnosis, such as surveillance, identifying needs, analyzing the causes of problems, collecting and interpreting data, case-finding, monitoring and forecasting trends, research, and evaluation of outcomes.

Policy Development - Policy formulation takes place as the result of interactions among a wide range of public and private organizations and individuals. It is the process by which decisions about problems are made, goals and the proper means for reaching them are chosen, conflicting views about what should be done are handled and resources are allocated.

Assurance - A core public sector function is to make sure that necessary services are provided to reach agreed upon goals, either by encouraging private sector action, by requiring it, or by providing services directly. The assurance function in public health involves seeing to the implementation of legislative mandates as well as maintaining statutory responsibilities.

Ten Essential Public Health Services

There are ten essential public health services considered to be necessary for a population to have access to prevention. A comprehensive public health system needs to:

- Monitor health status to identify community health problems**
- Diagnosis and investigate health problems and health hazards in the community**
- Inform, educate, and empower people about health issues**
- Mobilize community partnerships to identify and solve health problems**
- Develop policies and plans that support individual and community health efforts**
- Enforce laws and regulations that protect health and ensure safety**
- Link people to needed personal health services and assure the provision of health care when otherwise unavailable**
- Assure a competent public health and personal health care workforce**
- Evaluate effectiveness, accessibility, and quality of personal and population-based health services**
- Research for new insights and innovative solutions**

Public Health Nursing

Strategic Plan 2004

Bibliography

- Assessment of Health Status Problems. University of North Carolina at Chapel Hill School of Public Health, rev. 1995.
- Bryson, John M. Strategic Planning for Public and Nonprofit Organizations. San Francisco: Jossey-Bass, 1995.
- "CHAP Standards of Excellence" for Public Health Organizations. New York; The Community Health Accreditation Program, Inc. of the National League for Nursing, 1999.
- Core Public Health Services Delivered by MCH Agencies. Department of Health and Human Services Maternal and Child Health Bureau. MCHB/OSCH, March 97.
- The Definition of Public Health Nursing. A Statement of the Public Health Nursing Section, American Public Health Association, 1996.
- Fahrenwald, Nancy L., Cheryl Fischer, Roxanne Boysen, and Rebecca Maurer. "Population-Based Clinical Projects: Bridging Community-Based and Public Health Concepts. Nurse Educator vol. 24 No 6 (1999) 28-32.
- Foundations of Practice. State of Maine, Department of Human Services, Bureau of Health, Division of Family Health, Public Health Nursing, rev. 2003.
- Health Services Needs Assessment. University of North Carolina at Chapel Hill School of Public Health, rev. 1995.
- Health Maine 2010: Longer and Happier Lives, ed. Dora Anne Mills. Bureau of Health, Maine Department of Human Services, 2002.
- Health Maine 2010: Opportunities for All, ed. Dora Anne Mills. Bureau of Health, Maine Department of Human Services, 2002.
- HIPAA: Office of Civil Rights. United States Department of Health and Human Services. <http://www.hhs.gov/ocr/hipaa/>
- Keller, Linda Olson, Susan Strohschien, Betty Lia-Hoagberg, and Marjorie Schaffer. "Population Based Public Health Nursing Interventions: A Model for Practice." Public Health Nursing (June 1998).
- Mills, Dora Anne. "Top 10 Health Issues Faced by Maine People." Maine Policy Review, spring 2003.

