

**CONGRUENCE OF
POSITION DESCRIPTIONS FOR
PUBLIC HEALTH NURSES
WITH
ESSENTIAL SERVICES AND WITH
NATIONAL PROFESSIONAL
COMPETENCIES**

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Presenter Disclosures

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Background

- **Position descriptions (PDs) contribute to:**
 - Defining practice
 - **Aligning positions with organizational values**
 - Operations
 - Focusing performance evaluations
- **Published reports of using PDs to define, describe, differentiate nursing practice:**
 - School nurses, community mental health centers, ICU outreach liaison, CNS, NPs
- Issel et al. (2012) reviewed 18 PDs from staff PHNs in 6 local health departments
- Polivka & Chaudry (2013) reviewed PDs from PDs from 94 Ohio DONs and managers

Purpose

- Describe extent to which PDs for staff PHNs in Ohio local health departments incorporate ANA Standards for Public Health Nursing and 10 Essential Services for PHNs

- Categorize statements in PDs that do not reflect the ANA Standards or Essential Services

The study also mapped the Council on Linkages Public Health Competencies and the Quad Council competencies to PDs for staff PHN and PHN directors and supervisors.

ANA Performance Standards for PHN 2007:

- | | |
|--|---|
| 1. Assessment | 6. Evaluation |
| 2. Population diagnosis and priorities | 7. Quality of Practice |
| 3. Outcome identification | 8. Education |
| 4. Planning | 9. Professional Practice Evaluation |
| 5. Implementation | 10. Collegiality & Professional Relationships |
| a) Coordination of service | 11. Collaboration |
| b) Health education and health promotion | 12. Ethics |
| c) Consultation | 13. Research |
| d) Regulatory Activities | 14. Resource Utilization |
| | 15. Leadership |
| | 16. Advocacy |



Essential Services for PH

1. Monitor health status to identify & solve community health problems.
2. Diagnose and investigate health problems & health hazards in community.
3. Inform, educate, & empower people about health issues.
4. Mobilize community partnerships & action to identify and solve health problems.
5. Develop policies & plans that support individual & community health efforts.
6. Enforce laws & regulations that protect health and ensure safety.
7. Link people to needed personal health services & assure the provision of health care when otherwise unavailable.
8. Assure competent public & personal health care workforce.
9. Evaluate effectiveness, accessibility, & quality of personal and population-based health services.
10. Research for new insights & innovative solutions to health problems.

Methods

Sample and Data Collection

- Exempt from human subjects review
- PDs requested from PHN directors in all local health departments (LHDs) in Ohio (n=124)
- PDs received from 66 LHDs (53.2%)
 - No significant differences in LHD characteristics between those responding and those not responding

Data Management and Analysis

- Crosswalk for data abstraction developed & piloted
- Each PD reviewed independently by 2 reviewers
 - 100% agreement reached for all PDs
- Statements not reflective of any ANA Standards or Essential Service categorized as "Task Statements"
- Data analyzed using frequencies and chi-square statistics; $p = .05$



Characteristics of Local Health Departments
(N=66)

Characteristic	%
Type of Local Health Department	
• City	23%
• County	36%
• Combined City/County	41%
Service Area Population Density	
• Urban	74%
• Rural	26%
Ohio Geographic Region	
• Northwest	24%
• Northeast	24%
• Central	17%
• Southwest	20%
• Southeast	15%

Characteristics of Local Health (N=66)

Characteristic	%
Number of PHN staff full-time equivalents	
• 0-4	39%
• 5-10	36%
• 11-64	25%
Collective bargaining representation for PHNs	19%

Position Description Characteristics (N=161)

Characteristic	%
Date PD approved	
• Between 2009-2011	41%
• 2008 or before	39%
• No date noted on PD	20%
Position supervisor	
• Director of Nursing	67%
• PHN Supervisor	16%
• Other	5%
• Unspecified	12%
Bachelor's or higher degree required	32%
Use of a standardized PD template	48%

Position Descriptions that addressed 2007 ANA PHN Standards (N=161)

ANA Standard	%
1. Assessment	56%
2. Population Diagnosis & Priorities	11%
3. Outcomes Identification	1%
4. Planning	41%
5. Implementation	34%
5a. Coordination of Services	56%
5b. Health Education & Health Promotion	78%
5c. Consultation	56%
5d. Regulatory Activities	63%
6. Evaluation	12%
7. Quality of practice	16%
8. Education	50%

Position Descriptions that addressed 2007 ANA PHN Standards (N=161)

ANA Standard	%
9. Professional Practice Evaluation	0%
10. Collegiality & Professional Relationships	53%
11. Collaboration	49%
12. Ethics	21%
13. Research	1%
14. Resource Utilization	4%
15. Leadership	18%
16. Advocacy	6%
Total ANA standards - Mean (Standard Deviation; Range)	6.1(2.7) (0-13)

Differences in number of ANA Standards by subgroups

	M (SD)
PHN FTEs	
<11 FTEs	5.8 (2.7)
11+ FTEs	7.4 (2.5)
Ohio Area	
Northwest	7.0 (2.8)
Northeast	5.8 (2.7)
Central	6.9 (2.4)
Southwest	5.8 (2.5)
Southeast	4.7 (2.9)

Position Descriptions that addressed PH Essential Services (N=161)

Essential Services	%
1. Monitor health status	53%
2. Diagnose and investigate health problems	22%
3. Inform, educate, empower people	79%
4. Mobilize community partnerships	14%
5. Develop policies and plans	39%
6. Enforce laws and regulations	59%
7. Link people to needed personal health services	65%
8. Assure competent workforce	35%
9. Evaluation	35%
10. Research	1%
Total PH Essential Services- Mean (Standard Deviation; Range)	4 (2.0) (0-9)

Differences in number of PH Essential Services by subgroups

	M (SD)
Use of a template	
Yes	4.4 (1.8)
No	3.7 (2.1)
Ohio Area	
Northwest	4.8 (1.9)
Northeast	3.8 (1.7)
Central	4.2 (1.9)
Southwest	4.0 (1.9)
Southeast	2.9 (2.0)

Categorizations of PD Task Statements

Category	(%)
Order immunizations	65%
Lice checks	51%
Blood pressure screenings	50%
Administer injections/immunizations	44%
Make appointments	44%
Vision/hearing screenings	41%
Assist provider in clinic	37%
Perform diagnostic testing	37%
Take vital signs	35%
Perform car seat checks	32%
Prepare/maintain clinic records	29%

Categorizations of PD Task Statements

Category	(%)
Complete health history	29%
Complete home visits	27%
Diabetes screening	26%
Scoliosis screening	22%
Specimen collection	22%
Call in refills	16%
Order supplies	15%
Delegate responsibilities	8%
Dispense medications	8%
Data entry	6%
Obtain heights/weights/BMI	4%
Total Task Statements (M, SD), (Range)	6.2 (5.5) (0-19)

Differences in number of Task Statements by subgroups

Characteristic	N (%)
PD Approval Date	
Yes	5.3 (4.8)
No	9.3 (5.4)
PD Based on Template	
Yes	7.6 (6.2)
No	4.8 (4.3)
Geographic area	
Rural	9.3 (5.2)
Urban	5.2 (4.8)
LHD Type	
County	7.1 (5.2)
City	2.1 (2.3)
Combined/General Health District	6.9 (5.9)
Ohio Area	
Northwest	7.6 (6.1)
Northeast	3.0 (3.9)
Central	4.7 (5.8)
Southwest	8.1 (5.1)
Southeast	5.8 (4.1)

Discussion

- PDs addressed an average of 30% of the ANA Standards and 40% of PH Essential Services
- No ANA Standards or PH Essential Services were included in all of the PDs
- No PD included all of the ANA Standards or all PH Essential Services

Discussion

- Fewer than half of both PHN practice standards and PH Essential Services are addressed in this sample.
- Failure to incorporate current standards is a concern for a profession with a social mandate.
- What is level of awareness of PHN practice standards and competencies, PH frameworks?
- Should standardized PDs be created for PHNs?



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