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MAPPING
The Public Health Nursing Discipline Specific Competencies Version 1.0
and
The Canadian Community Health Nursing Standards

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Introduction

For Canadian nurses, the Community Health Nursing Standards (CHNAC, 2008) define the scope of practice or expectations for acceptable nursing practice while the Public Health Nursing Discipline Specific Competencies (CHNAC, 2009) define the essential skills, knowledge and abilities necessary for the practice of public health nursing.

Underwood (2007) defines competencies as a “behaviors” and standards as “the level of service intervention or outcome”. In other words, competencies describe the activity that a public health professional engages in to meet a standard or set of standards. Both ‘standards’ and ‘competencies’ could refer to structure, process or outcomes.

To highlight the inter-connection between the Community Health Nursing Standards of Practice (CHNAC, 2008) and the Public Health Nursing Discipline Specific Competencies (CHNAC, 2009) and to demonstrate evidence that the Nursing Standards of Practice were considered in the development of the public health nursing discipline specific competencies, the following mapping activity was undertaken.

In section 1 the mapping activity linked the Public Health Nursing Discipline Specific Competencies to the Community Health Nursing Standards of Practice. In section 2 the mapping activity linked the Community Health Nursing Standards of Practice to the Public Health Nursing Discipline Specific Competencies.

Special Note:

Although the following discipline specific competencies could not be mapped to the Canadian Community Health Nursing Standards of Practice these competencies are expected for entry level registered nurses nationally throughout Canada (College of Nurses of Ontario, 2008):

Competency 1.4 – Critically appraise knowledge gathered from a variety of sources.

Competency 3A.4 – Implement a policy.

Competency 3C.3 – Demonstrate the ability to integrate relevant research and implement evidence informed practice.

Competency 7.1 – Describe the mission and priorities of the public health organization where one works, and apply them in practice.

Section 1

Mapping the Public Health Nursing Competencies to the Community Health Nursing Standards of Practice

Key:

The shaded area that follows each standard describes the public health nursing discipline specific competency to which the standard is linked

The Community Health Nursing Standards of Practice

Standard 1: Promoting health

1.a. Health Promotion

The community health nurse...

1.a.1. Collaborates with individual, community and other stakeholders to do a holistic assessment of assets and needs of the individual or community.

(PHN Competency Statements 1.1 and 3B.2)

1.a.2. Uses a variety of information sources to access data and research findings related to health at the national, provincial, territorial, regional and local levels.

(PHN Competency Statements 1.7 and 2.3)

1.a.3. Identifies and seeks to address root causes of illness and disease. (PHN Competency Statements 2.4 and 3B.2)

1.a.4. Facilitate planned change with the individual, community or population by applying the Population Health Promotion Model.

? Identifies the level of intervention necessary to promote health.

? Identifies which determinants of health require action or change to promote health.

? Uses a comprehensive range of strategies to address health-related issues.

(PHN Competency Statements 3C.2 and 5.1)

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- 1.a.5. Demonstrates knowledge of and effectively implements health promotion strategies based on the Ottawa Charter for Health Promotion.
- ? Incorporates multiple strategies: promoting healthy public policy, strengthening community action, creating supportive environments, developing personal skills and reorienting the health system.
 - ? Identifies strategies for change that will make it easier for people to make healthier choices.
- (PHN Competency Statements 3C.1)
- 1.a.6. Collaborates with the individual and community to help them take responsibility for maintaining or improving their health by increasing their knowledge, influence and control over the determinants of health.
- (PHN Competency Statements 4.1 , 5.1 and 6.2)
- 1.a.7. Understands and uses social marketing, media and advocacy strategies to raise awareness of health issues, place issues on the public agenda, shift social norms and change behaviours if other enabling factors are present.
- (PHN Competency Statement 6.3)
- 1.a.8. Helps the individual and community to identify their strengths and available resources and take action to address their needs.
- (PHN Competency Statement 4.5)
- 1.a.9. Recognizes the broad impact of specific issues on health promotion such as political climate and will, values and culture, individual and community readiness, and social and systemic structures.
- (PHN Competency Statements 2.5 and 5.1)
- 1.a.10. Evaluates and modifies population health promotion programs in partnership with the individual, community and other stakeholders.
- (PHN Competency Statements 3D.1 and 3D.3)

Standard 1: Promoting health (continued)

1.b. Prevention and health protection

The community health nurse ...

- 1.b.1. Recognizes the differences between the levels of prevention (primary, secondary, tertiary).
- (PHN Competency Statement 1.3)

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1.b.2. Selects the appropriate level of preventive intervention.

(PHN Competency Statement 1.3)

1.b.3. Helps individuals and communities make informed choices about protective and preventive health measures such as immunization, birth control, breastfeeding and palliative care.

(PHN Competency Statement 2.7)

1.b.4. Helps individuals, groups, families and communities to identify potential risks to health.

(PHN Competency Statement 2.7)

1.b.5. Uses harm reduction principles to identify, reduce or remove risk factors in a variety of contexts including the home, neighbourhood, workplace, school and street.

(PHN Competency Statement 5.3)

1.b.6. Applies epidemiological principles when using strategies such as screening, surveillance, immunization, communicable disease response and outbreak management, and education.

(PHN Competency Statement 1.3)

1.b.7. Engages collaborative, interdisciplinary and intersectoral partnerships to address risks to individual, family, community or population health and to address prevention and protection issues such as communicable disease, injury and chronic disease.

(PHN Competency Statement 3C.4)

1.b.8. Collaborates on developing and using follow-up systems in the practice setting to ensure that the individual or community receives appropriate and effective service.

(PHN Competency Statement 3D.1)

1.b.9. Practices in accordance with legislation relevant to community health practice (e.g., public health legislation and child protection legislation).

(PHN Competency Statement 8.6)

1.b.10. Evaluates collaborative practice (personal, team and intersectoral) for achieving individual and community outcomes such as reduced communicable disease, injury, chronic disease or impacts of a disease process.

(PHN Competency Statements 3D.3 and 4.1)

Standard 1: Promoting health (continued)

1.c. Health maintenance, restoration and palliation

The community health nurse...

1.c.1. Assesses the health status and functional competence of the individual, family or population within the context of their environmental and social supports.

(PHN Competency Statement 2.6)

1.c.2. Develops a mutually agreed upon plan and priorities for care with the individual and family.

(PHN Competency Statement 3C.5)

1.c.3. Identifies a range of interventions including health promotion, disease prevention and direct clinical care strategies (including palliation), along with short- and long-term goals and outcomes.

(PHN Competency Statement 2.8)

1.c.4. Maximizes the ability of an individual, family or community to take responsibility for and manage their health needs according to resources and personal skills available.

(PHN Competency Statement 3C.5)

1.c.5. Supports informed choice and respects the individual, family or community's specific requests while acknowledging diversity, unique characteristics and abilities.

(PHN Competency Statement 5.2)

1.c.6. Adapts community health nursing techniques, approaches and procedures as appropriate to the challenges in a particular community situation or setting.

(PHN Competency Statement 8.4)

1.c.7. Uses knowledge of the community to link with, refer to or develop appropriate community resources.

(PHN Competency Statement 1.7)

1.c.8. Recognizes patterns and trends in epidemiological data and service delivery and initiates strategies for improvement.

(PHN Competency Statements 1.7 and 2.1)

1.c.9. Facilitates maintenance of health and the healing process for individuals, families and communities in response to significant health emergencies or other community situations that negatively impact health.

(PHN Competency Statement 1.2 and 3C7)

- 1.c.10. Evaluates individual, family and community outcomes systematically and continuously in collaboration with individuals, families, significant others, community partners and other health practitioners.

(PHN Competency Statement 3D.1)

Standard 2: Building individual and community capacity

The community health nurse...

- 2.1. Works collaboratively with the individual, community, other professionals, agencies and sectors to identify needs, strengths and available resources.

(PHN Competency Statement 2.4)

- 2.2. Facilitates action in support of the five priorities of the Jakarta Declaration to:

- promote social responsibility for health
- increase investments for health development
- expand partnerships for health promotion
- increase individual and community capacity
- secure an infrastructure for health promotion.

(PHN Competency Statements 2.9 and 4.4)

- 2.3. Uses community development principles.

- Engages the individual and community in a consultative process.
- Recognizes and builds on the readiness of the group or community to participate.
- Uses empowering strategies such as mutual goal setting, visioning and facilitation.
- Understands group dynamics and effectively uses facilitation skills to support group development.
- Helps the individual and community to participate in the resolution of their issues.
- Helps the group and community to gather available resources to support taking action on their health issues.

(PHN Competency Statements 4.5)

- 2.4. Uses a comprehensive mix of community- and population-based strategies such as coalition building, intersectoral partnerships and networking to address concerns of groups or populations.

(PHN Competency Statements 3A.3 and 3B.1)

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- 2.5. Supports the individual, family, community or population to develop skills for self-advocacy.
(PHN Competency Statements 3B.1 and 3C.5)
- 2.6. Applies principles of social justice and engages in advocacy to support those who are not yet able to take action for themselves.
(PHN Competency Statements 3A.7, 3C.10 and 3C.11)
- 2.7. Uses a comprehensive mix of interventions and strategies to customize actions to address unique needs and build individual and community capacity.
(PHN Competency Statements 3A.2 and 3B.1)
- 2.8. Supports community action to influence policy change in support of health.
(PHN Competency Statements 2.9, 3A.1, 3A.3, 3A.5 and 3A.8)
- 2.9. Actively works with health professionals and community partners to build capacity for health promotion.
(PHN Competency Statements 3A.6 and 7.2)
- 2.10. Evaluates the impact of change on individual or community control and health outcomes.
(PHN Competency Statement 3D.1)

Standard 3: Building relationships

The community health nurse...

- 3.1. Recognizes her or his personal beliefs, attitudes, assumptions, feelings and values about health and their potential effect on interventions with individuals and communities.
(PHN Competency Statement 2.7)
- 3.2. Identifies the individual and community beliefs, attitudes, feelings and values about health and their potential effect on the relationship and intervention.
(PHN Competency Statement 2.7)
- 3.3. Is aware of and uses culturally relevant communication when building relationships. Communication may be verbal or non-verbal, written or graphic. It may involve face-to-face, telephone, group facilitation, print or electronic methods.
(PHN Competency Statements 4.2 and 6.1)

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- 3.4. Respects and trusts the ability of the individual or community to know the issue they are addressing and solve their own problems.
(PHN Competency Statements 4.1 and 4.5)
- 3.5. Involves the individual, family and community as an active partner to identify relevant needs, perspectives and expectations.
(PHN Competency Statement 4.5)
- 3.6. Establishes connections and collaborative relationships with health professionals, community organizations, businesses, faith communities, volunteer service organizations and other sectors to address health-related issues.
(PHN Competency Statement 4.1)
- 3.7. Maintains awareness of community resources, values and characteristics.
(PHN Competency Statement 2.2)
- 3.8. Promotes and supports linkages with appropriate community resources when the individual or community is ready to receive them (e.g., hospice or palliative care, parenting groups).
(PHN Competency Statement 3C.9)
- 3.9. Maintains professional boundaries in often long-term relationships in the home or other community settings where professional and social relationships may become blurred.
(PHN Competency Statement 7.3)
- 3.10. Negotiates an end to the relationship when appropriate (e.g., when the client assumes self-care or when the goals for the relationship have been achieved).
(PHN Competency Statement 7.3)

Standard 4: Facilitating access and equity

The community health nurse ...

- 4.1. Assesses and understands individual and community capacities including norms, values, beliefs, knowledge, resources and power structures.
(PHN Competency Statements 1.7, 2.6, 2.7 and 4.1)
- 4.2. Provides culturally sensitive care in diverse communities and settings.
(PHN Competency Statement 5.3)
- 4.3. Supports individuals and communities in their choice to access alternate health care options.
(PHN Competency Statement 5.2)

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- 4.4. Advocates for appropriate resource allocation for individuals, groups and populations to support access to conditions for health and health services.
(PHN Competency Statements 4.3 and 4.4)
- 4.5. Refers, coordinates or facilitates access to services in the health sector and other sectors.
(PHN Competency Statement 3C.8)
- 4.6. Adapts practice in response to the changing health needs of the individual and community.
(PHN Competency Statement 3C.9)
- 4.7. Collaborates with individuals and communities to identify and provide programs and delivery methods that are acceptable to them and responsive to their needs across the life span and in different circumstances.
(PHN Competency Statement 3B.3)
- 4.8. Uses strategies such as home visits, outreach and case finding to ensure access to services and health-supporting conditions for potentially vulnerable populations (e.g., persons who are ill, elderly, young, poor, immigrants, isolated or have communication barriers).
(PHN Competency Statement 5.2)
- 4.9. Assesses the impact of the determinants of health on the opportunity for health for individuals, families, communities and populations.
(PHN Competency Statement 2.1)
- 4.10. Advocates for healthy public policy by participating in legislative and policy-making activities that influence health determinants and access to services.
(PHN Competency Statement 3A.7)
- 4.11. Takes action with and for individuals and communities at the organizational, municipal, provincial, territorial and federal levels to address service gaps and accessibility issues.
(PHN Competency Statements 4.1 and 4.4)
- 4.12. Monitors and evaluates changes and progress in access to the determinants of health and appropriate community services.
(PHN Competency Statement 3D.2)

Standard 5: Demonstrating professional responsibility and accountability

The community health nurse ...

- 5.1. Takes preventive or corrective action individually or in partnership to protect individuals and communities from unsafe or unethical circumstances.
(PHN Competency Statements 3C.10 and 3C.11)
- 5.2. Advocates for societal change in support of health for all.
(PHN Competency Statements 4.1 and 4.4)
- 5.3. Uses nursing informatics (including information and communication technology) to generate, manage and process relevant data to support nursing practice.
(PHN Competency Statements 1.5, 1.7 and 6.4)
- 5.4. Identifies and takes action on factors which affect autonomy of practice and quality of care.
(PHN Competency Statement 8.1)
- 5.5. Participates in the advancement of community health nursing by mentoring students and new practitioners.
(PHN Competency Statement 7.6)
- 5.6. Participates in research and professional activities.
(PHN Competency Statement 1.5)
- 5.7. Makes decisions using ethical standards and principles, taking into consideration the tension between individual versus societal good and the responsibility to uphold the greater good of all people or the population as a whole.
(PHN Competency Statements 1.7 and 8.2)
- 5.8. Seeks help with problem solving as needed to determine the best course of action in response to ethical dilemmas, risks to human rights and freedoms, new situations and new knowledge.
(PHN Competency Statements 1.7 and 8.3)
- 5.9. Identifies and works proactively—through personal advocacy and participation in relevant professional associations—to address nursing issues that will affect the population.
(PHN Competency Statement 7.6)

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- 5.10. Contributes proactively to the quality of the work environment by identifying needs, issues and solutions, mobilizing colleagues and actively participating in team and organizational structures and mechanisms.
(PHN Competency Statements 7.5 and 8.7)
- 5.11. Provides constructive feedback to peers as appropriate to enhance community health nursing practice.
(PHN Competency Statement 7.6)
- 5.12. Documents community health nursing activities in a timely and thorough manner, including telephone advice and work with communities and groups.
(PHN Competency Statements 2.3 and 8.6)
- 5.13. Advocates for effective and efficient use of community health nursing resources.
(PHN Competency Statement 8.5)
- 5.14. Uses reflective practice to continually assess and improve personal community health nursing practice.
(PHN Competency Statements 1.7 and 8.4)
- 5.15. Seeks professional development experiences that are consistent with current community health nursing practice, new and emerging issues, the changing needs of the population, the evolving impact of the determinants of health and emerging research.
(PHN Competency Statements 1.6 and 7.4)
- 5.16. Acts upon legal obligations to report to appropriate authorities any situations of unsafe or unethical care provided by family, friends or other individuals to children or vulnerable adults.
(PHN Competency Statement 8.6)
- 5.17. Uses available resources to systematically evaluate the availability, acceptability, quality, efficiency and effectiveness of community health nursing practice.
(PHN Competency Statements 1.5, 1.7 and 3C.6)

Section 2

Mapping the Community Health Nursing Standards to the Public Health Nursing Discipline Specific Competencies

Key:

The shaded area that follows each competency statement describes the specific community health nursing standard to which the competency statement is linked.

Public Health Nursing Competencies Version 1.0

Public Health Nursing Competencies are the integrated knowledge, skills, judgement and attributes required of a public health nurse to practice safely and ethically. Attributes include, but are not limited to attitudes, values and beliefs. (Canadian Nurses Association Code of Ethics, 2008)

1 - PUBLIC HEALTH and NURSING SCIENCES

This category includes key knowledge and critical thinking skills related to: the public health sciences (behavioural and social sciences, biostatistics, epidemiology, environmental public health, demography, workplace health, prevention of chronic diseases, infectious diseases, psychosocial problems and injuries) as well as nursing theory, change theory, economics, politics, public health administration, community assessment, management theory, program planning and evaluation, population health principles, community development theory, and the history of public health. Competency in this category requires the ability to apply knowledge in practice.

A public health nurse is able to...

- 1.1 Apply knowledge about the following concepts: the health status of populations; inequities in health; the determinants of health and illness; social justice; principles of primary health care; strategies for health promotion; disease and injury prevention; health protection, as well as the factors that influence the delivery and use of health services.

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Standard 1 A. 1 - Collaborates with individual, community and other stakeholders to do a holistic assessment of assets and needs of the individual or community.

- 1.2 Apply knowledge about the history, structure and interaction of public health and health care services at local, provincial/territorial, national, and international levels.

Standard 1 C.9 - Facilitates maintenance of health and the healing process for individuals, families and communities in response to significant health emergencies or other community situations that negatively impact health.

- 1.3 Apply public health and nursing sciences to practice and synthesize knowledge from a broad range of theories, models and frameworks.

Standard 1 B.1 - Recognizes the differences between the levels of prevention (primary, secondary, tertiary).

Standard 1 B.2 – Selects the appropriate level of preventive intervention.

Standard 1 B.6 - Applies epidemiological principles when using strategies such as screening, surveillance, immunization, communicable disease response and outbreak management, and education.

- 1.4 Critically appraise knowledge gathered from a variety of sources.

Currently no standard developed to link this competency.

- 1.5 Use evidence and research to inform health policies, programs and practice:
- contribute to the development and generation of evidence-based nursing
 - use available resources to systematically plan and evaluate public health nursing practice

Standard 5.3 - Uses nursing informatics (including information and communication technology) to generate manage and process relevant data to support nursing practice.

Standard 5.6 - Participates in research and professional activities.

Standard 5.17 - Uses available resources to systematically evaluate the availability, acceptability, quality, efficiency and effectiveness of community health nursing practice.

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- 1.6 Pursue lifelong learning opportunities in the field of public health that are consistent with: current public health nursing practice; new and emerging issues; the changing needs of individuals, families, groups and communities; emerging research and evolving information about the impact of the determinants of health.

Standard 5.15 - Seeks professional development experiences that are consistent with current community health nursing practice, new and emerging issues, the changing needs of the population, the evolving impact of the determinants of health and emerging research.

- 1.7 Integrate multiple ways of knowing into practice.

Standard 1 A 2 - Uses a variety of information sources to access data and research findings related to health at the national, provincial, territorial, regional and local levels.

Standard 1 C 7 - Uses knowledge of the community to link with, refer to or develop appropriate community resources.

Standard 1 C 8 - Recognizes patterns and trends in epidemiological data and service delivery and initiates strategies for improvement

Standard 4 1 - Assesses and understands individual and community capacities including norms, values, beliefs, knowledge, resources and power structures.

Standard 5.3 - Uses nursing informatics (including information and communication technology) to generate, manage and process relevant data to support nursing practice.

Standard 5.7 - Makes decisions using ethical standards and principles, taking into consideration the tension between individual versus societal good and the responsibility to uphold the greater good of all people or the population as a whole.

Standard 5.8 - Seeks help with problem solving as needed to determine the best course of action in response to ethical dilemmas, risks to human rights and freedoms, new situations and new knowledge.

Standard 5.14 - Uses reflective practice to continually assess and improve personal community health nursing practice.

Standard 5.17 - Uses available resources to systematically evaluate the availability, acceptability, quality, efficiency and effectiveness of community health nursing practice.

2 - ASSESSMENT AND ANALYSIS

This category describes the core competencies needed to collect, assess, analyze and apply information (including data, facts, concepts and theories). These competencies are required to make evidence-based decisions, prepare budgets and reports, conduct investigations and make recommendations for policy and program development. Community members are involved in identifying and reinforcing those aspects of everyday life, culture and political activity that are conducive to health.

A public health nurse is able to...

2.1 Recognize that a health concern or issue exists:

- apply principles of epidemiology
- conduct comprehensive community assessments with individuals, families, groups and communities using quantitative and qualitative strategies
- recognize patterns and trends in epidemiological data and service delivery
- assess the impact of the broad social, cultural, political and economic determinants of health.

Standard 1 C 8 - Recognizes patterns and trends in epidemiological data and service delivery and initiates strategies for improvement.

Standard 4.9 - Assesses the impact of the determinants of health on the opportunity for health for individuals, families, communities and populations.

2.2 Identify relevant and appropriate sources of information, including community assets, resources and values in collaboration with individuals, families, groups, communities and stakeholders.

Standard 3.7 – Maintaining awareness of community resources, values and characteristics.

2.3 Collect, store, retrieve and use accurate and appropriate information on public health issues.

Standard 1 A 2 - Uses a variety of information sources to access data and research findings related to health at the national, provincial, territorial, regional and local levels.

Standard 5.12 - Documents community health nursing activities in a timely and thorough manner, including telephone advice and work with communities and groups.

2.4 Analyze information to determine appropriate implications, uses, gaps and limitations.

Standard 1 A 3 - Identifies and seeks to address root causes of illness and disease.

Standard 2.1 - Works collaboratively with the individual, community, other professionals, agencies and sectors to identify needs, strengths and available resources.

2.5 Assess impact of specific issues on health such as; political climate and will; values and culture; social and systemic structures; settings; as well as the individual, family, group, and community's readiness and capacity.

Standard 1 A 9 - Recognizes the broad impact of specific issues on health promotion such as political climate and will, values and culture, individual and community readiness, and social and systemic structures.

2.6 Assess the health status and functional competence of individuals, families, groups, communities or populations within the context of their environmental and social supports.

Standard 1 C.1 - Assesses the health status and functional competence of the individual, family or population within the context of their environmental and social supports.

Standard 4.1 - Assesses and understands individual and community capacities including norms, values, beliefs, knowledge, resources and power structures.

2.7 Determine the meaning of information, considering the ethical, political, scientific, socio-cultural and economic contexts:

- identify attitudes, beliefs, feelings and values about health and their effect on relationships and interventions
- support individuals, families, groups and communities to identify risks to health and make informed choices about protective and preventive health measures
- describe the role of power in relationships by giving voice to the vulnerable
- demonstrate skill in dealing with diversity and high levels of ambiguity.

Standard 1 B 3 - Helps individuals and communities make informed choices about protective and preventive health measures such as immunization, birth control, breastfeeding and palliative care.

Standard 1 B 4 - Helps individuals, groups, families and communities to identify potential risks to health.

Standard 3.1 - Recognizes her or his personal beliefs, attitudes, assumptions, feelings and values about health and their potential effect on interventions with individuals and communities.

Standard 3.2 - Identifies the individual and community beliefs, attitudes, feelings and values about health and their potential effect on the relationship and intervention.

Standard 4.1 - Assesses and understands individual and community capacities including norms, values, beliefs, knowledge, resources and power structures.

2.8 Recommend specific actions based on the analysis of information:

- identify a range of appropriate interventions including health promotion; health protection; disease and injury prevention and clinical care using a multi strategy and multi target approach
- identify short and long term goals
- identify outcome indicators
- identify research questions.

Standard 1 C 3 - Identifies a range of interventions including health promotion, disease prevention and direct clinical care strategies (including palliation), along with short- and long-term goals and outcomes.

2.9 Recognize opportunities to promote social justice.

Standard 2.8 Applies principles of social justice and engages in advocacy to support those who are not yet able to take action for themselves.

Standard 2.2 Facilitates action in support of the five priorities of the Jakarta Declaration to:

- promote social responsibility for health
- increase investments for health development
- expand partnerships for health promotion
- increase individual and community capacity
- secure an infrastructure for health promotion.

3 – POLICY AND PROGRAM PLANNING, IMPLEMENTATION AND EVALUATION

This category describes the core competencies needed to effectively choose options, and to plan, implement and evaluate policies and/or programs in public health. This includes the management of incidents such as outbreaks and emergencies.

3(A) - POLICY DEVELOPMENT

A public health nurse is able to...

3A.1 Describe selected policy options to address a specific public health issue.

Standard 2.8 - Supports community action to influence policy change in support of health.

3A.2 Describe the implications of each policy option, especially as they apply to the determinants of health and recommend or decide on a course of action.

Standard 2.7 - Uses a comprehensive mix of interventions and strategies to customize actions to address unique needs and build individual and community capacity.

3A.3 Develop a plan to implement a course of action taking into account relevant evidence, legislation, emergency planning procedures, regulations and policies.

Standard 2.4 - Uses a comprehensive mix of community- and population-based strategies such as coalition building, intersectoral partnerships and networking to address concerns of groups or populations.

Standard 2.8 - Supports community action to influence policy change in support of health.

3A.4 Implement a policy.

Currently no standard developed to link this competency.

3A.5 Support community action to influence policy change.

Standard 2.8 - Supports community action to influence policy change in support of health.

3A.6 Build community capacity to improve health and address health inequities

Standard 2.9 - Actively works with health professionals and community partners to build capacity for health promotion.

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3A.7 Advocate for healthy public policy and services that promote and protect the health and well-being of individuals, families groups and communities.

Standard 2.6 - Applies principles of social justice and engages in advocacy to support those who are not yet able to take action for themselves.

Standard 4.10 - Advocates for healthy public policy by participating in legislative and policy-making activities that influence health determinants and access to services.

3A.8 Advocate for the reduction of inequities in health through legislative and policy making activities.

Standard 2.8 - Supports community action to influence policy change in support of health.

3(B) - PROGRAM PLANNING

A public health nurse is able to...

3B.1 Describe selected program options to address a specific public health issue.

Standard 2.4 - Uses a comprehensive mix of community- and population-based strategies such as coalition building, intersectoral partnerships and networking to address concerns of groups or populations.

Standard 2.5 - Supports the individual, family, community or population to develop skills for self-advocacy.

Standard 2.7 - Uses a comprehensive mix of interventions and strategies to customize actions to address unique needs and build individual and community capacity.

3B.2 Describe the implications of each option, especially as they apply to the determinants of health and recommend or decide on a course of action.

1 A.1 Collaborates with individual, community and other stakeholders to do a holistic assessment of assets and needs of the individual or community.

1 A.3 Identifies and seeks to address root causes of illness and disease.

3B.3 Develop a plan in collaboration with individuals, families, groups and communities to implement a course of action that is responsive to needs taking into account relevant evidence, legislation, emergency planning procedures, regulations and policies.

Standard 4.7 Collaborates with individuals and communities to identify and provide programs and delivery methods that are acceptable to them and responsive to their needs across the life span and in different circumstances.

3(C) - IMPLEMENTATION AND INTERVENTION

A public health nurse is able to...

3C.1 Take action, across multiple levels, to address specific public health issues by using a comprehensive mix of public health strategies to address unique needs and to build individual, family, group and community capacity.

Standard 1 A 5 - Demonstrates knowledge of and effectively implements health promotion strategies based on the Ottawa Charter for Health Promotion.

- ? Incorporates multiple strategies: promoting healthy public policy, strengthening community action, creating supportive environments, developing personal skills and reorienting the health system.
- ? Identifies strategies for change that will make it easier for people to make healthier choices.

3C.2 Facilitate planned change with individuals, families, groups, communities, systems or population(s) by applying the Population Health Promotion Model, primary health care principles and appropriate change theory.

Standard 1A4 Supports planned change with the individual, community or population by applying the Population Health Promotion Model.

- ? Identifies the level of intervention necessary to promote health.
- ? Identifies which determinants of health require action or change to promote health.
- ? Uses a comprehensive range of strategies to address health-related issues.

Mapping CHN Standards and PHN Competencies

3C.3 Demonstrate the ability to integrate relevant research and implement evidence informed practice.

Currently no standard developed to link this competency.

3C.4 Participate in collaborative, interdisciplinary and intersectoral partnerships to enhance the health of individuals, families, groups, communities and populations.

Standard 1 B.7 - Engages collaborative, interdisciplinary and intersectoral partnerships to address risks to individual, family, community or population health and to address prevention and protection issues such as communicable disease, injury and chronic disease.

3C.5 Maximize the capacity of the individual, family, group or community to take responsibility for and to manage their health needs according to resources available and personal skills.

Standard 1 C.2 - Develops a mutually agreed upon plan and priorities for care with the individual and family.

Standard 1 C.4 - Maximizes the ability of an individual, family or community to take responsibility for and manage their health needs according to resources and personal skills available.

Standard 2.5 - Supports the individual, family, community or population to develop skills for self-advocacy.

3C.6 Set and follow priorities and maximize outcomes based on available resources.

Standard 5.17 - Uses available resources to systematically evaluate the availability, acceptability, quality, efficiency and effectiveness of community health nursing practice.

3C.7 Fulfill functional roles in response to a public health emergency.

Standard 1C9 - Facilitates maintenance of health and the healing process for individuals, families and communities in response to significant health emergencies or other community situations that negatively impact health.

3C.8 Facilitate access to services in the health sector and other sectors.

Standard 4.5 - Refers, coordinates or facilitates access to services in the health sector and other sectors.

Mapping CHN Standards and PHN Competencies

3C.9 Adapt practice in response to the changing health needs of the individual, family, group and community and in response to the unique characteristics of the setting.

Standard 3.8 - Promotes and supports linkages with appropriate community resources when the individual or community is ready to receive them (e.g., hospice or palliative care, parenting groups).

Standard 4.6 - Adapts practice in response to the changing health needs of the individual and community.

3C.10 Take action to protect individuals, families, groups and communities from unsafe or unethical circumstances.

Standard 2.6 - Applies principles of social justice and engages in advocacy to support those who are not yet able to take action for themselves.

Standard 5.1 - Takes preventive or corrective action individually or in partnership to protect individuals and communities from unsafe or unethical circumstances.

3C.11 Advocate in collaboration with, and on behalf of, and with individuals, families, groups and communities on social justice related issues

Standard 2.6 - Applies principles of social justice and engages in advocacy to support those who are not yet able to take action for themselves.

Standard 5.1 - Takes preventive or corrective action individually or in partnership to protect individuals and communities from unsafe or unethical circumstances.

3(D) - EVALUATION

A public health nurse is able to...

3D.1 Evaluate an action, policy or program in a systematic and continuous manner by measuring its effect on individuals, families, groups or communities.

Standard A1 10- Evaluates and modifies population health promotion programs in partnership with the individual, community and other stakeholders.

Standard 1B 8- Collaborates on developing and using follow-up systems in the practice setting to ensure that the individual or community receives appropriate and effective service.

Standard 1 C.10 - Evaluates individual, family and community outcomes systematically and continuously in collaboration with individuals, families, significant others, community partners and other health practitioners.

Standard 2.10 - Evaluates the impact of change on individual or community control and health outcomes.

3D.2 Evaluate programs in relation to determinants of health and health outcomes.

Standard 4.12 - Monitors and evaluates changes and progress in access to the determinants of health and appropriate community services.

3D.3 Evaluate programs in partnership with individuals, families, groups, communities and other stakeholders.

Standard A1 10- Evaluates and modifies population health promotion programs in partnership with the individual, community and other stakeholders.

Standard 1 B.10 - Evaluates collaborative practice (personal, team and intersectoral) for achieving individual and community outcomes such as reduced communicable disease, injury, chronic disease or impacts of a disease process.

4 – PARTNERSHIPS, COLLABORATION AND ADVOCACY

This category captures the competencies required to influence and work with others to improve the health and well-being of the public through the pursuit of a common goal. This includes the concepts of: social justice, which is the fair distribution of society's benefits and responsibilities and their consequences (Canadian Nurses Association, Code of Ethics, 2008); partnership and collaboration which is to optimize performance through shared resources and responsibilities; advocacy which is to speak, write or act in favour of a particular cause, policy or group of people and aims to reduce inequities in health status or access to health services.

A public health nurse is able to...

4.1 Advocate for societal change in support of health for all:

- collaborate with partners to address public health issues and service gaps in order to achieve improved health outcomes
- build coalitions, intersectoral partnerships and networks
- facilitate the change process to impact the determinants of health and improve health outcomes.

Standard 1 A 6 - Collaborates with the individual and community to help them take responsibility for maintaining or improving their health by

increasing their knowledge, influence and control over the determinants of health.

Standard 1 B 10 - Evaluates collaborative practice (personal, team and intersectoral) for achieving individual and community outcomes such as reduced communicable disease, injury, chronic disease or impacts of a disease process.

Standard 3.4 - Respects and trusts the ability of the individual or community to know the issue they are addressing and solve their own problems.

Standard 3.6 - Establishes connections and collaborative relationships with health professionals, community organizations, businesses, faith communities, volunteer service organizations and other sectors to address health-related issues.

Standard 4.1 - Assesses and understands individual and community capacities including norms, values, beliefs, knowledge, resources and power structures.

Standard 4.11 - Takes action with and for individuals and communities at the organizational, municipal, provincial, territorial and federal levels to address service gaps and accessibility issues.

Standard 5.2 - Advocates for societal change in support of health for all.

4.2 Use skills such as team building, negotiation, conflict management and group facilitation to build partnerships and to support group development.

Standard 3.3 - Is aware of and uses culturally relevant communication when building relationships. Communication may be verbal or non-verbal, written or graphic. It may involve face-to-face, telephone, group facilitation, print or electronic methods.

4.3 Mediate between differing interests in the pursuit of health and well-being, and advocate for appropriate resource allocation and equitable access to resources.

Standard 4.4 - Advocates for appropriate resource allocation for individuals, groups and populations to support access to conditions for health and health services.

4.4 Advocate for healthy public policies and services that promote and protect the health and well-being of individuals and communities.

Standard 2.2 - Facilitates action in support of the five priorities of the Jakarta Declaration to:

- promote social responsibility for health
- increase investments for health development
- expand partnerships for health promotion
- increase individual and community capacity

- secure an infrastructure for health promotion.

Standard 4.4 - Advocates for appropriate resource allocation for individuals, groups and populations to support access to conditions for health and health services.

Standard 4.11 - Takes action with and for individuals and communities at the organizational, municipal, provincial, territorial and federal levels to address service gaps and accessibility issues.

Standard 5.2 - Advocates for societal change in support of health for all.

- 4.5 Involve individuals, families, groups and communities as active partners to identify assets, strengths and available resources and to take action to address health inequities, needs, deficits and gaps.

Standard 1 A. 8 - Helps the individual and community to identify their strengths and available resources and take action to address their needs.

Standard 3.4 - Respects and trusts the ability of the individual or community to know the issue they are addressing and solve their own problems.

Standard 3.5 - Involves the individual, family and community as an active partner to identify relevant needs, perspectives and expectations.

Standard 2.3 - Uses community development principles.

- Engages the individual and community in a consultative process.
- Recognizes and builds on the readiness of the group or community to participate.
- Uses empowering strategies such as mutual goal setting, visioning and facilitation.
- Understands group dynamics and effectively uses facilitation skills to support group development.
- Helps the individual and community to participate in the resolution of their issues.
- Helps the group and community to gather available resources to support taking action on their health issues.

5 - DIVERSITY AND INCLUSIVENESS

This category identifies the competencies required to interact effectively with diverse individuals, families, groups and communities in relation to others in society as well to recognize the root causes of disparities and what can be done to eliminate them (Canadian Nurses Association, Code of Ethics, 2008). It is the embodiment of attitudes and actions that result in inclusive behaviours, practices, programs and policies.

A public health nurse is able to...

5.1 Recognize how the determinants of health (biological, social, cultural, economic and physical) influence the health and well-being of specific population groups.

Standard 1 A.4 - Facilitate planned change with the individual, community or population by applying the Population Health Promotion Model.

? Identifies the level of intervention necessary to promote health.

? Identifies which determinants of health require action or change to promote health.

? Uses a comprehensive range of strategies to address health-related issues.

Standard 1 A.6 - Collaborates with the individual and community to help them take responsibility for maintaining or improving their health by increasing their knowledge, influence and control over the determinants of health.

Standard 1 A.9 - Recognizes the broad impact of specific issues on health promotion such as political climate and will, values and culture, individual and community readiness, and social and systemic structures.

5.2 Address population diversity when planning, implementing, adapting and evaluating public health programs and policies.

Standard 1 C.5 - Supports informed choice and respects the individual, family or community's specific requests while acknowledging diversity, unique characteristics and abilities.

Standard 4.3 - Supports individuals and communities in their choice to access alternate health care options.

Standard 4.8 - Uses strategies such as home visits, outreach and case finding to ensure access to services and health-supporting conditions for potentially vulnerable populations (e.g., persons who are ill, elderly, young, poor, immigrants, isolated or have communication barriers).

5.3 Apply culturally-relevant and appropriate approaches with people from diverse cultural, socioeconomic and educational backgrounds, and persons of all ages, genders, health status, sexual orientations and abilities.

Standard 1 B.5 - Uses harm reduction principles to identify, reduce or remove risk factors in a variety of contexts including the home, neighbourhood, workplace, school and street.

Standard 4.2 - Provides culturally sensitive care in diverse communities and settings.

6 – COMMUNICATION

Communication involves an interchange of ideas, opinions and information. This category addresses numerous dimensions of communication including internal and external exchanges; written, verbal, non-verbal and listening skills; computer literacy; providing appropriate information to different audiences; working with the media and social marketing techniques.

A public health nurse is able to...

6.1 Communicate effectively with individuals, families, groups, communities and colleagues:

- use verbal, non verbal and written or graphic communication skills
- speak and write in plain language
- use multi-sensory forms of communication to address unique communication styles
- use culturally relevant communication when building relationships.

Standard 3.3 - Is aware of and uses culturally relevant communication when building relationships. Communication may be verbal or non-verbal, written or graphic. It may involve face-to-face, telephone, group facilitation, print or electronic methods.

6.2 Interpret information for professional, non professional and community audiences.

1 A.6 - Collaborates with the individual and community to help them take responsibility for maintaining or improving their health by increasing their knowledge, influence and control over the determinants of health.

6.3 Mobilize individuals, families, groups and communities by using appropriate media, community resources and social marketing techniques.

Standard 1A.7 - Understands and uses social marketing, media and advocacy strategies to raise awareness of health issues, place issues on the public agenda, shift social norms and change behaviours if other enabling factors are present.

6.4 Use current technology to communicate effectively.

Standard 5.3 - Uses nursing informatics (including information and communication technology) to generate, manage and process relevant data to support nursing practice.

7 – LEADERSHIP

This category focuses on leadership competencies that build capacity, improve performance and enhance the quality of the working environment. They also enable organizations and communities to create, communicate and apply shared visions, missions and values.

A public health nurse is able to...

7.1 Describe the mission and priorities of the public health organization where one works, and apply them in practice.

Currently no standard developed to link this competency.

7.2 Contribute to developing key values and a shared vision to assess, plan and implement public health programs and policies in the community by actively working with health professionals and in partnership with community partners to build capacity.

Standard 2.9 - Actively works with health professionals and community partners to build capacity for health promotion

7.3 Use public health and nursing ethics to manage self, others, information and resources and practice in accordance with all relevant legislation, regulating body standards and codes (e.g. provincial health legislation, child welfare legislation, privacy legislation, Canadian Nurses Association Code of Ethics for registered nurses).

Standard 3.9 - Maintains professional boundaries in often long-term relationships in the home or other community settings where professional and social relationships may become blurred.

Standard 3.10 - Negotiates an end to the relationship when appropriate (e.g., when the client assumes self-care or when the goals for the relationship have been achieved).

7.4 Contribute to team and organizational learning in order to advance public health goals.

Standard 5.15 - Seeks professional development experiences that are consistent with current community health nursing practice, new and emerging issues, the changing needs of the population, the evolving impact of the determinants of health and emerging research.

7.5 Contribute to the maintenance of organizational performance standards.

Standard 5.10 - Contributes proactively to the quality of the work environment by identifying needs, issues and solutions, mobilizing colleagues and actively participating in team and organizational structures and mechanisms.

7.6 Demonstrate an ability to build capacity by sharing knowledge, tools, expertise and experience:

- participate in professional development and practice development activities
- mentor students and orient new staff
- participate in research and quality assurance initiatives.

Standard 5.5 - Participates in the advancement of community health nursing by mentoring students and new practitioners.

Standard 5.9 - Identifies and works proactively—through personal advocacy and participation in relevant professional associations—to address nursing issues that will affect the population.

Standard 5.11- Provides constructive feedback to peers as appropriate to enhance community health nursing practice.

8 – Professional Responsibility and Accountability

This category addresses a number of dimensions including the recognition that nurses are accountable for their actions and are responsible for making sure they have the required knowledge and skills needed to ensure the delivery of safe, compassionate, competent and ethical care. It includes the competencies required to maintain quality work environments and relationships needed in a professional practice. Public Health nurses are responsible for initiating strategies that will address the determinants of health and generate a positive impact on people and systems. They are accountable to a variety of authorities and stakeholders as well as to the individual and community they serve. This range of accountabilities places them in a variety of situations with unique ethical dilemmas.

8.1 Demonstrate professionalism in independent practice in multiple settings with multiple stakeholders.

Standard 5.4 - Identifies and takes action on factors which affect autonomy of practice and quality of care.

8.2 Apply ethical standards and principles taking into consideration appropriate public health and nursing ethics.

Standard 5.7 - Makes decisions using ethical standards and principles, taking into consideration the tension between individual versus societal good and the responsibility to uphold the greater good of all people or the population as a whole.

8.3 Consult as needed to determine the best course of action in response to: ethical dilemmas, safety issues, risks to human rights and freedoms, new situations and new knowledge.

Standard 5.8 - Seeks help with problem solving as needed to determine the best course of action in response to ethical dilemmas, risks to human rights and freedoms, new situations and new knowledge.

8.4 Use reflective practice to continually assess and improve practice:

- examine practice in relation to personal and individual, family, group or community attributes, existing knowledge and context
- adapt public health nursing techniques, approaches and procedures to the challenges in a particular community situation or setting.

Standard 1 C. 6 - Adapts community health nursing techniques, approaches and procedures as appropriate to the challenges in a particular community situation or setting.

Standard 5.14 - Uses reflective practice to continually assess and improve personal community health nursing practice.

8.5 Advocate for effective, efficient and responsible use of resources.

Standard 5.13 - Advocates for effective and efficient use of community health nursing resources.

8.6 Act upon legal and professional obligations, and practices in accordance with relevant legislation.

Standard 1 B.9 - Practices in accordance with legislation relevant to community health practice (e.g., public health legislation and child protection legislation).

Standard 5.12 - Documents community health nursing activities in a timely and thorough manner, including telephone advice and work with communities and groups.

Standard 5.16 - Acts upon legal obligations to report to appropriate authorities any situations of unsafe or unethical care provided by family, friends or other individuals to children or vulnerable adults.

Mapping CHN Standards and PHN Competencies

- 8.7 Contribute to the quality of public health nursing work environments by identifying needs, issues, solutions and mobilizing colleagues by actively participating in team and organizational structures and mechanisms.

Standard 5.10 - Contributes proactively to the quality of the work environment by identifying needs, issues and solutions, mobilizing colleagues and actively participating in team and organizational structures and mechanisms.

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