

# Public Health Nursing Competencies 1.0

Welcome to Community Health Nurses  
of Canada (CHNC) Celebration

June 18, 2009

# ACKNOWLEDGEMENTS



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# WHO WE ARE



Community Health Nurses Association of Canada (CHNAC) is a federation of provincial/territorial community health nurse interest groups providing a unified voice to represent and promote community health nursing and the health of communities.

# WHO WE ARE



As an association, our objectives are to:

- Promote standards of Community Health Nursing practice throughout Canada
- Promote quality in Community Health Nursing services
- Provide a national forum for Community Health Nurses to communicate, discuss issues and concerns and to share knowledge and expertise
- Promote research and evidence in Community Health Nursing practice
- Enhance awareness of Community Health Nursing practice
- Encourage members to participate in affairs which promote public and community well-being

# BACKGROUND

- *Core Competencies for Public Health in Canada Release 1.0* were released in September, 2007
- Core Competencies define the knowledge, skills and attitudes necessary for the practice of public health in Canada
- Core Competencies transcend the boundaries of specific disciplines
- Building Block of PH Workforce Development in Canada
  - Map the Core Competencies to Discipline Specific competencies – where they exist

# Core Competencies for Public Health in Canada: Release 1.0



Launched at Canadian Public Health Association Conference

Ottawa, ON  
September 16, 2007



# Building the Public Health Workforce for the 21<sup>st</sup> Century

A Pan-Canadian  
Framework for Public  
Health Human  
Resources Planning

The Joint Task Group  
on Public Health  
Human Resources

Advisory Committee on  
Health Delivery and  
Human Resources

Advisory Committee on  
Population Health and  
Health Security

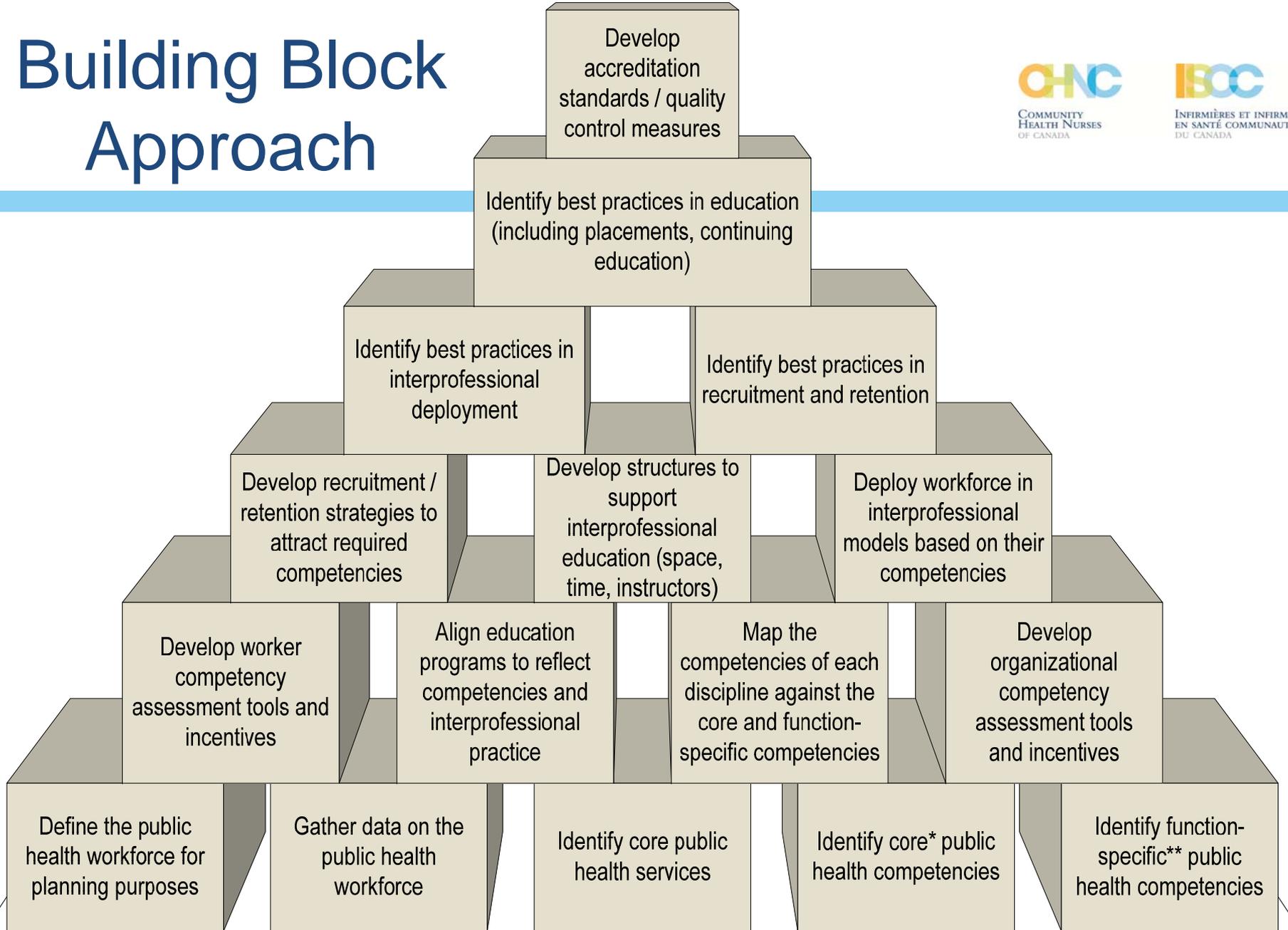


October 2005

## Goals:

- Optimal number, mix & distribution of competent public health professionals
- Inter-professional service models & teams
- Capacity to recruit & retain public health professionals
- Healthy & safe work environments.

# Building Block Approach



Public health needs of the population

# BACKGROUND



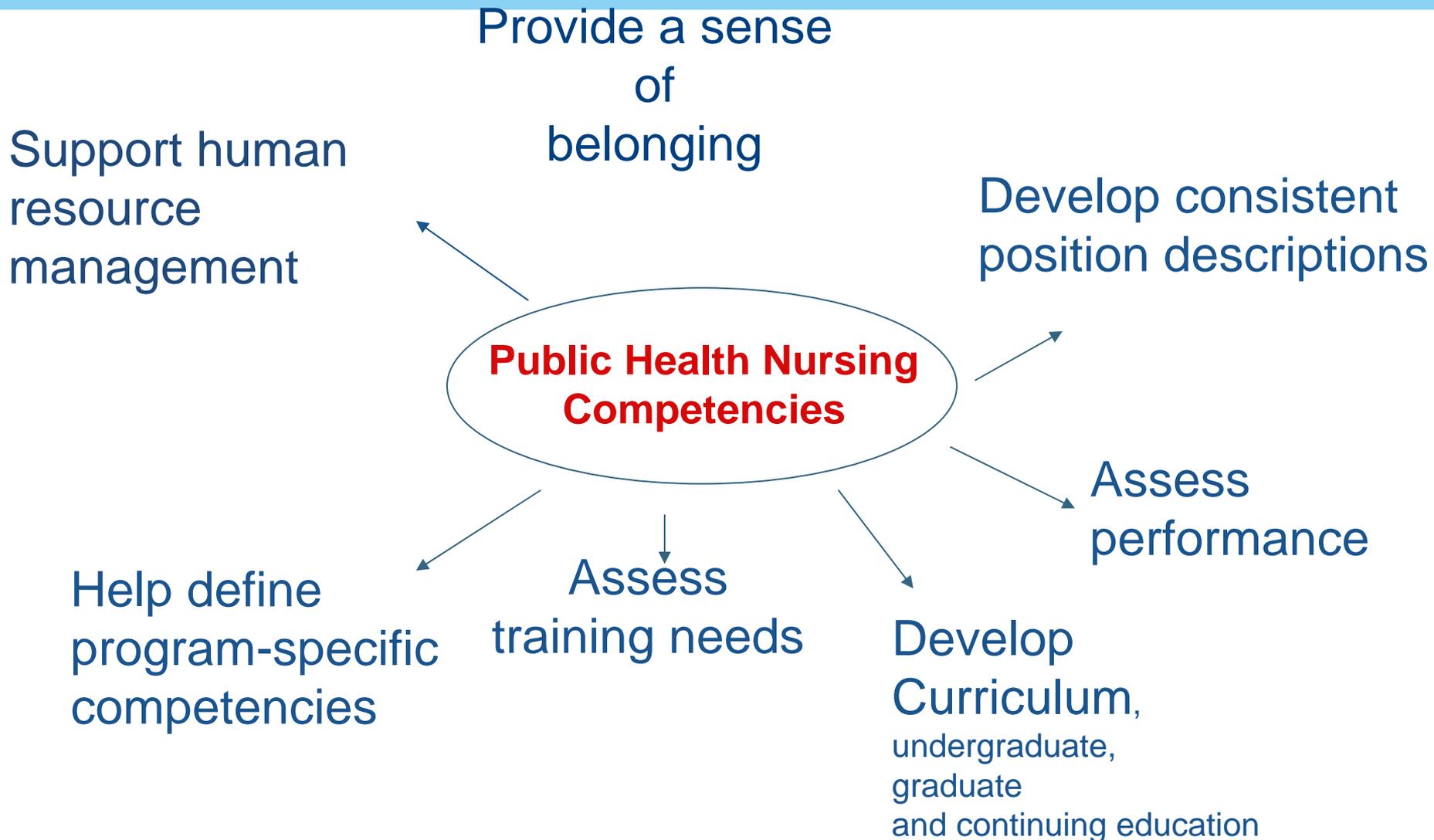
- Community Health Nursing Standards of Practice (edited 2008)
- *Public Health Nursing Practice in Canada: A Review of the Literature* (Hogan, 2008)
- Identified as a priority by the Community Health Nurses Association of Canada (CHNAC) and the Public Health Agency of Canada (PHAC).

# WHAT ARE THEY



**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)**

# Uses



# Methodology: PHN Competencies

## Delphi

**A committee-free environment that stimulates reflection and imagination**

# The Delphi Technique

- Consultative process used to achieve consensus among a group of individuals who have expertise in an area
- Structured process for collecting and distilling knowledge from a group of experts using a series of questionnaires
- Requires:
  - anonymity,
  - iteration with controlled feedback, and
  - statistical response (both qualitative and quantitative).

# The Delphi Technique

- several rounds
- results of each round used to form the basis for the next round.
- result is a consensus that reflects the participants' combined intuition and expert knowledge.

# Round 1 of the Delphi

- A review of collected opinions on various aspects of public health nursing competencies

Informed by:

- Core Competencies for Public Health in Canada,
- Community Health Nursing Standards of Practice and related work.
- Literature review

**Results:** A very preliminary draft set of competencies

**(Qualitative)**

# Round 2 of the Delphi

- Using an “Expert Group” the very preliminary draft set of competencies were reviewed, edited and refined in three steps
  - a survey
  - a webinar/teleconference
  - a last chance opportunity to review and edit the document.

**Results:** 66 draft public health nursing discipline specific competencies were identified

**(Qualitative and Quantitative)**

# Round 3 of the Delphi

- Sought feedback from a broad range of Canadian nurses practicing in public health
- Used a snowball approach, to invite nurses' participation
- Survey respondents were requested to rate the importance of each of the draft competencies statements developed in Round 2 using the rating scales of:
  - essential;
  - important;
  - somewhat important;
  - not at all important to PHN practice;
  - don't know.

**(Quantitative)**

# Round 3 - Results

## Results of the Cross Canada Survey

- 77% completion rate by the 540 people who opened the survey
- Survey participants agreed that all of the competencies were either;
  - essential or important to public health nursing practice
- Level of agreement with the competencies ranged from 74% - 99% agreement.

# Round 4 of the Delphi

The level of agreement was so high from Round 3 this step was not needed.

# Limitations of our Methodology

- Under representation in some geographical areas
- Compressed time frames – survey only opened for 7 days
- Using the snow ball approach – could not assure that all reminders were in keeping with Dillman process
- Likert Scale - “Don’t know” item may have been confusing
- Denominator is unknown because number of public health nurses practicing in Canada not known.

# Perspectives

- Practitioner
- Employer
- Educator

# Scenario



Over the past few years in your province, you have noticed that the initiation rates for breastfeeding have stayed stable, but the duration rates are still not increasing and in some areas, even decreasing. You find the latest data from the Canadian Community Health Survey which indicates that just 29% of moms in your province breastfeed their babies exclusively for the first 6 months of life. You were involved in a local survey of new mothers and from the results, you find that the initiation and duration rates in your area are lower than the provincial average. This is a significant issue as you know from the research that exclusively breastfed babies are healthier. In your area there are more teenage mothers, single mothers, more mothers that did not complete high school and many families have a lower income than the provincial average – all of these can affect breastfeeding rates. You have also noticed a trend of higher multiple births in your area. Finally, you are aware that an artificial baby-milk company invites regularly visits the maternity floor of your hospital leaving formula samples for new moms and gifts for the staff.

# Competencies

- 2.1 Recognize that a health concern or issue exists
  
- 3A.7 Advocate for healthy public policy and services that promote and protect the health and well-being of individuals, families, groups and communities
  
- 6.3 Mobilize individuals, families, groups and communities by using appropriate media, community resources and social marketing techniques

# Practitioner

- Considering the scenario, how would the practitioner use the competencies to respond ?

# Employer

- How could an employer assess the level of competency and determine the learning needs of the practitioner?

# Educator

- Are there additions or changes that need to occur in current curriculum to better prepare new practitioners to address the competencies identified in the scenario?



# Next Steps

- ***Launch Version 1.0*** of Public Health Nursing Discipline Specific Competencies at CHNAC Conference (June 2009) – *French & English*
- Continue concentrated effort for ***involvement in under represented areas*** – working towards Version 2.0
- ***Share work*** with other public health disciplines
- ***Initiate process*** to develop home health discipline specific competencies
- Continue to develop ***Knowledge Translation*** strategies for adoption of the competencies

Blaze, blaze through the land  
With competencies held in our hand  
Our knowledge is great and we reach  
higher stakes  
Oh, Public Health Nursing, we blaze