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## Background

Nursing is a profession that requires a combination of theory and practice in order to adequately prepare individuals to meet the expected new graduate competencies. The successful acquisition of community health nursing knowledge and skills requires that nursing education programs have a strong community clinical practice component. Research in Canada has shown clinical placements to support community nursing education are decreasing, and numerous placement challenges exist (1). To overcome some of these challenges, Canadian schools of nursing have developed innovative clinical practice experiences including non-health sector placements. Variations in the content, process and outcomes of these experiences has led to calls for national dialogue to help standardize the educational quality of community health clinical placements

These guidelines were developed by the CASN Sub-Committee on Public Health (see Terms of Reference on last page). This Sub-Committee has a mandate to assist CASN members in ensuring that all baccalaureate graduates of Canadian schools of nursing are prepared to meet the Canadian Community Health Nursing Standards of *Practice* at an entry-to-practice level (2). These guidelines were developed through extensive consultation with community health nursing educators, managers and practitioners from across Canada. Consultation activities included a national survey, three national consultation meetings and multiple focus groups. The following guidelines should be used to structure and optimize the opportunities for student learning in community health placements.

# 1 Community Health Nursing Identity

#### **ESSENTIAL:**

- Faculty advisor/clinical instructor has knowledge of the Canadian Community Health Nursing Standards of Practice, primary health care principles, public health sciences and nursing science.
- Faculty advisor/clinical instructor is able to translate the community placement experience so that students can understand the community health nursing role.

#### PREFERRED:

• Faculty advisor/clinical instructor has current community health nursing practice experience.

## **Community Health Nursing Scope of Practice**

#### **ESSENTIAL:**

- There is potential for students to work with clients at group and/or community levels.
- There is potential for exposure to broad determinants of health, citizen engagement, population health, and primary health care principles.
- There is exposure to multiple community health nursing strategies e.g. Building healthy public policy; Developing personal skills; Strengthening community action; Creating supportive environments; Reorienting health services<sup>(3)</sup>.
- There are opportunities for practical experience where students can see the results of their actions and move toward independent practice.
- There are opportunities to develop collaborative relationships/partnerships.

#### PREFERRED:

- There are opportunities for the student to engage in practice with community as client.
- Students will experience being part of an interprofessional and potentially intersectoral team.
- Rural, remote and international placements are available.

## Competent Well-Prepared Preceptor

#### **ESSENTIAL:**

- There are organizational supports to precept, especially in the form of time to effectively support students.
- The preceptor has a positive attitude toward preceptorship and life-long learning.
- The preceptor has experience working in and/or with communities.
- The preceptor has the ability to help students apply theory into practice.

#### PREFERRED:

- Formal preceptor orientation is provided collaboratively by the community organization and the academic institution e.g. preceptor workshop or module.
- The preceptor is a nurse with community health nursing experience and knowledge of the Canadian Community Health Nursing Standards of Practice, primary health care principles, public health sciences and nursing science.

# Supportive Environment for Student Learning

#### **ESSENTIAL:**

- In a preceptored learning situation, there is ongoing, regular communication between faculty, preceptors and students, with at least one verbal contact.
- The community placement setting has a caring and welcoming attitude towards student mentoring.
- Student orientation to the placement setting is provided.
- Attention is paid to student safety.

#### PREFERRED:

- In a preceptored learning situation, there is verbal communication at least at the beginning, middle and end of the experience involving faculty, preceptors and students.
- Student preference in placement choice should be given consideration.

# Community-Academic Partnership

#### **ESSENTIAL:**

- Formalized agreements (e.g. MOU, signed contract) exist between the community organization and the academic institution.
- Clearly defined roles and expectations are agreed to by the community organization and the academic institution.
- Formal recognition of preceptor contribution is provided.

#### PREFERRED:

 Formalized cross-appointments exist between the community organization and the academic institution.

## References

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## Glossary

#### Community health nurse

Community health nursing practice describes the work of nurses who work in the community. Community health nurses partner with people where they live, work, learn, meet and play to promote health (2)

#### **Exposure**

A beginning integration of the relevancy and influence of concepts to community health nursing practice.

#### Faculty advisor/clinical instructor

Faculty/staff employed by the academic institution

#### Ottawa Charter for Health Promotion<sup>(3)</sup>

Health promotion strategies: Building healthy public policy; Developing personal skills; Strengthening community actions; Creating supportive environments; Reorienting health services

#### **Preceptor**

A person, employed by the community organization, who effectively role-models working in and/or with communities

#### **Primary Health Care Principles**

As originally outlined in the Alma Ata<sup>(4)</sup> and further expanded upon in recent position statements <sup>(5, 6)</sup>

#### **Public Health Sciences**

Behavioural and social sciences, biostatistics, epidemiology, environmental public health, demography, workplace health, and the prevention of chronic diseases, infectious diseases, psychosocial problems and injuries <sup>(7)</sup>

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#### Terms of Reference

- 1. To represent CASN's position on Public Health/Community Health (PH/CH) nursing education in national discussions related to public and community health.
- 2. To develop CASN's national position on Public Health Nursing.
- 3. To develop entry level competencies for Community Health Nursing practice which reflect CHN knowledge and skills.
- 4. To develop guidelines to assist baccalaureate nursing programs in meeting recognized standards for PH/CH nursing practice.
- 5. To enable regular communication between the Chair of this Sub-Committee and the Chair of the Standing Committee on Education.
- 6. To report to the Board of Directors and Council as requested.