

The Rhetoric/Ideals

- At all levels of:
 - Health governance
 - Nursing's regulatory bodies
 - Undergraduate nursing curricula
- Not consistently implemented at the policy, profession, or individual level

Rhetoric vs. Reality

• "...In the years to come there will be an increased focus on addressing the determinants of health and on health promotion, and greater collaboration across sectors and health disciplines to enable health for all, although not as a replacement for illness care and supportive care which will remain a priority...'

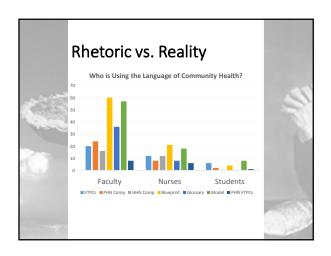
Rhetoric vs. Reality

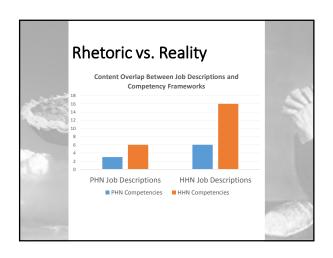
- Downstream, acute care is the focus
- Fiscal austerity—stealing from Peter to pay Paul
- Lack of government-endorsed infrastructure
- · Ideals are out of reach on a daily basis (Ladhani, Stevens, & Scherpbier, 2014)

Rhetoric vs. Reality • Competencies for community health areas are delineated clearly (canadian • Are they trickling down to practice? • Are they supported in role descriptions? (Hemlingway, Aarts, Koskinen, Campbell, & C 2013; Ladhani, Stevens, & Scherpbier, 2014; Pollvka, Valedes Chaudry, a Jones, 2014; Royal College of Nursing, 2012a; Schofield et al., 2011) CHNC JOB

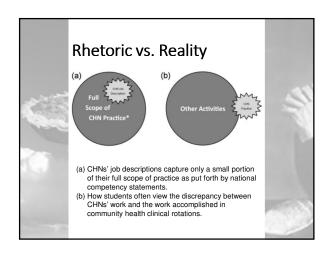
Rhetoric vs. Reality

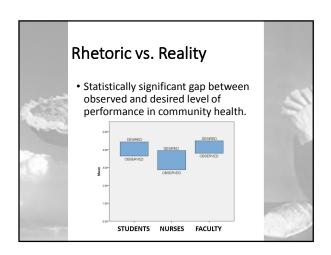
- The language of community health: on the ground versus ideals
 - Content analysis:
 - ETPCs
 - - CASN Quality PlacementsPHN Competencies
 - HHN Competencies CHNC Blueprint for Action
 - CHNC Glossary
 - CHNC Practice Model CPHA PHN Roles
 - · CHN Exam Competencies
 - PHN ETPCs
 - · Requisite Skills and Abilities

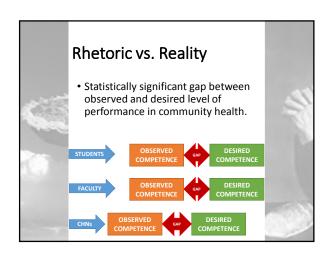




Rhetoric vs. Reality • Are students being prepared for community health nursing practice roles through their undergraduate experiences? • Should they be? • How? Individual care, population health? Should the work in which students engage resemble future or present role realities? • Community health nursing versus community based nursing (cohen & Gregory, 2009)







Rhetoric vs. Reality

- Different perspectives among CHNs, CH faculty, and senior nursing students, on:
 - What it means to be ready for community health practice
 - The role of the CHN clinical experience
 - The nature of foundations for CH practice
 - The future of nursing practice
- Do the ideals of community health divide us or do they unite us?

The Questions

- Are CHN ideals the substance of community health nurses' work?
- To what degree are the ideals attainable in a climate of fiscal restraint?
- Do CHN ideals place an unfair burden on community health nurses, who lack the administrative power and resources to enact the rhetoric in daily practice?

The Questions

- Do CHN ideals place an unrealistic expectation on new nurses, who expect to participate in this work within a system that is currently not amenable to it?
- Does BN education today prepare graduates who can work in existing, traditional community health roles, or is today's graduate being prepared for a health care system that has yet to materialize?

The Questions

 What will be the impact of the NCLEX-RN exam on community health content in Canadian curricula?

Taking the Lead

- Time for curriculum renewal and examination in Canada
- Time to evaluate nurses' role in community health
- Time to enhance communication between academe and practice (CH)
 - What is meant by "community care"?
 - Are we preparing nursing graduates for both current realities and future possibilities?

Taking the Lead

- Are we where we need to be?
- Are we living up to our ideals?
- Can we accept the risks associated with challenging the status quo?



Acknowledgements

- Thank you to the Community Health Nurses of Canada, Canadian Association of Schools of Nursing, and Canadian Nurses Association
- Thank you to WNRCASN for partially funding my graduate study on students' readiness to practice in community health areas



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