SESSION: 303A

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PUBLIC HEALTH NURSING DOCUMENTATION PRACTICE IN MANITOBA

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OVERVIEW

- Introduction
- ■Case study
- □Public Health Nursing (PHN) documentation in ManitobaGaps in the practice
- Development of PHN documentation tools
- Nursing implications
- Conclusion

CASE STUDY

Client related issues

- □34 weeks pregnant mother of three
- ■Drug and alcohol misuse
- Mental health issues
- Housing
- Encounters with the law
- Involvement with child and family services (CFS)



- Difficult childhood
- Domestic violence

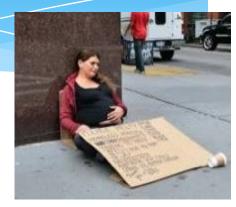


Image source: The Liberal, 2017



CASE STUDY

Roshi's (PHN) Documentation Dilemma

- Meeting professional & legal standards
- Time spent documenting
- Depict areas of PHN ongoing action
- Clear and legible
- Continuity of client care





GAPS IN DOCUMENTATION PRACTICES IN MANITOBA



Image source: Matt & Bailey, 2016)



Image source: Wrexham Glyndwr University,

Capture need of entire family



A mother far from home, 2017



Image source: ADEA, 2016

Used for 6-8 week postpartum

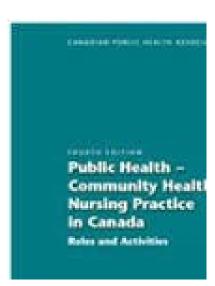
Address Social determinants of Health (SDOH)

PROCESS OF DEVELOPING PHN DOCUMENTATION TOOLS









PROCESS OF DEVELOPING PHN DOCUMENTATION TOOLS

- Formation of PHN documentation committee
- Engaging stakeholders
- Conduct literature scan
- Develop Principles of PHN documentations
- Drafting documentation tools
- ☐Present findings
- Piloting
- Revising
- □Roll-out

LITERATURE SCAN

Lack of literature on PHN documentation.

Findings:

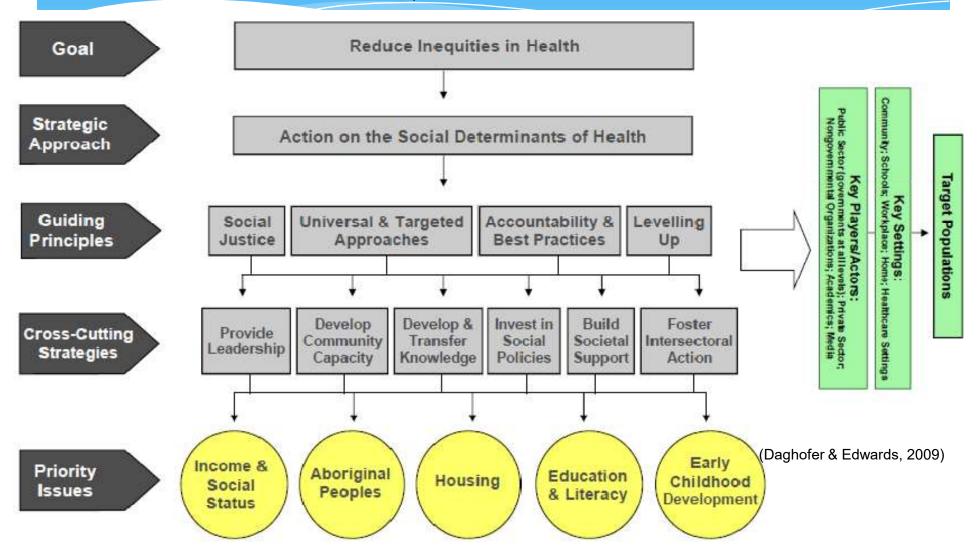
- Nursing documentation methods
- Compare practice in different provinces.
- Principles of PHN documentation
- ■Frameworks
- Health Equity Indicators
- Recommendations



Image Source: Global Academic Research Writers (2017)

FRAMEWORKS

TOWARDS HEALTH EQUITY: FRAMEWORK FOR ACTION



FRAMEWORKS

Organization supports:

- · Policies and procedures manuals
- Decision support tools
- Environmental and human resource supports

Client communicates:

- Needs
- Goals
- Perspective
- Choice and preference

Nurses document:

- Assessment
- Planning
- Implementation
- Evaluation

College of Nurses of Ontario supports:

- Practice standards
- Practice guidelines
- Fact sheets

Results of above inter-relationships

Complete documentation that demonstrates:

- Communication
- Accountability
- Legislative requirements

College of Registered Nurses of Ontario, (2008)

RECOMMENDATIONS

- ■Standardize documentation tools
- ■Formulate indicators
- Minimize duplication
- ☐ Family oriented tools
- ☐ Electronic patient records (EPR)

HEALTH EQUITY ACTION TOOL

- Family-centered PHN documentation tool.
- Integration of health equity into PHNs practice.
- Long-term ongoing PHN documentation.
- Documentation of service coordination and referrals to community programs and resources.

HEALTH EQUITY ACTION TOOL

FAMILY FIRST SUMMARY

FFS score: Parent survey score: Enrolled to FFP: YES

Indicate by initial if client was assessed; (I/P) Intervention/ plan of action. Where varial identified indicate with a (V). Progress note should be made where variance was indicated.

Legends: A-Assessed at this visit; NA- Not Assessed; I/P-Intervention/Plan of action; P. made.

EQUITY INDICATORS (SDOH)

| | Date | | Date | | Date | | Date | | | |
|-------------------------|------|--|------|-------|------|----------|------|-----|---|--|
| D. Income and Financial | | | | | | | | | | |
| Security/Stability | | | | | | | | | | |
| Identification: | | | 8 | | | 36 50 | 8 8 | . 3 | | |
| Taxes: | | | | | | | | | Ī | |
| Benefits: | | | | | | (A | | | Ī | |
| Bank Account: | | | | | À | | | | Ī | |
| RESP: | | | | | | | | | Ī | |
| Transportation option | | | | W = 0 | | _ | | | | |

HEALTH EQUITY ACTION TOOL

RECOMMENDED RESOURCES/PARTNERHSIP

Specify resources recommended/partnerships for client in space provided and it check mark appropriate recommendations: Box 1; Recommended; Box 2; Curro Box 3: Referral made

| Date | Health Services | 1 | 2 | 3 | End Date | Comments |
|------|-----------------|---|---|---|----------|----------|
| | | | | | | |
| | | | | | | |

SECTION D

Guidelines for Completing the Form

Heath equity tool should be used for prenatal, postpartum and early childhood (ECD) clients identified as at risk by a positive Family first screen (FFS) or PHN's clinical judgment.

The tool provides the opportunity to document PHN encounters on an ongoing basis when addressing social determinants.

Indicate by initial if the client was assessed (A); (I/P)

Loss/Grief: No history of pregnation of pregnancy and at any age. Achealth, grieving reaction and so Trauma: No history of traumatic (Utilize trauma informed approximate individuals with traumatic Refugee)

Beware of the effects of interge from past and current assimilati experienced by Indigenous popi

B. Food security and Nutrition
Ability to obtain safe, culturally
nutritionally adequate food. Ref

PROGRESS & LESSONS

Progress:

- ☐ Reviews and improvements on tools
- ☐ Piloting of the tools.
- Positive reviews concerning the utility of the tool

Lessons:

- ■Complexity of PHN practice
- Making PHN practice visible
- □ Identifying documentation methods applicable to PHN practice.
- ☐ Integrating the tool with existing PHN documentation tools

NURSING IMPLICATION

- Clear articulation of public health nursing as a specialty.
- Supports evidence-based nursing practice
- □Reflects community health practice and public health competencies
- ☐Positive effects on patient outcomes
- ■Increase in nursing knowledge
- Opportunity to integrate health equity into PHN practice



CONCLUSION

- Documentation is integral to PHN practice
- ☐ Gaps identified in PHN documentation practice.
- □Support the development tools that based on the Health Equity.
- Need for research examining application of tools that address SDOH.

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Thank you!