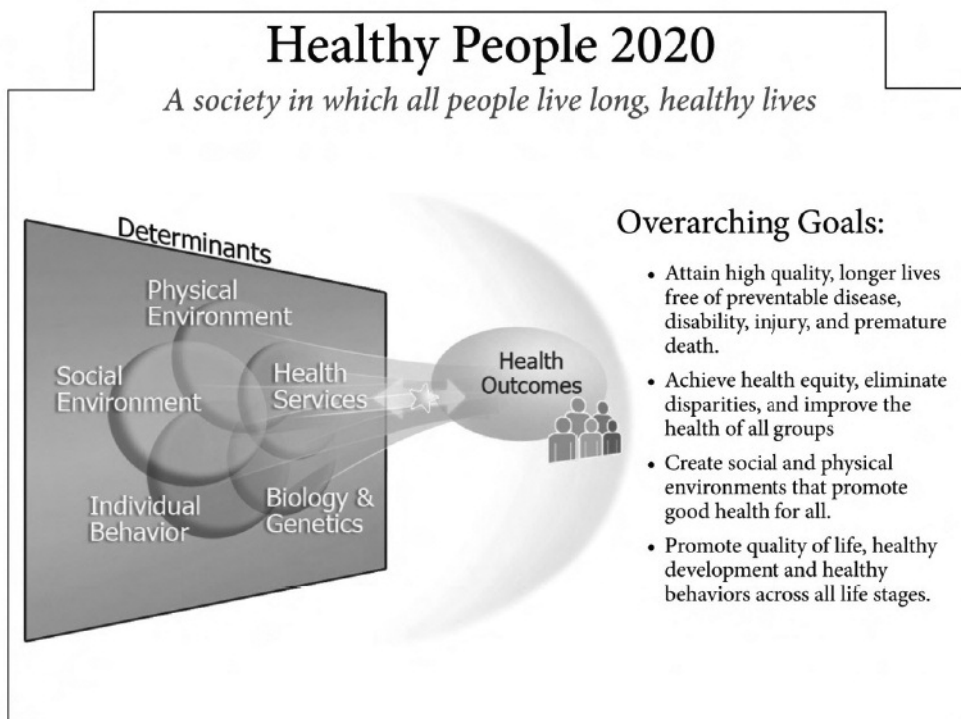


APPENDIX

PUBLIC HEALTH NURSING ASSESSMENT TOOL

DESIGNED BY
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PUBLIC HEALTH NURSING:
APPLYING AND DOING



Suggestions for Table Use:

1. Read all horizontal and vertical columns. These will give clues about the key questions to ask.
2. Fill in the vertical column for each table that requests information on the Seven A's. When filling in these boxes, place the most pertinent information that you think informs the assessment.
3. When completing Section I Part 3-3(B-1): Access to Care, note that this is a summary of the work that you did in Part 1. Reflect on this information and arrive at your decisions pertaining to access to care.
4. In some instances, you need to consider collecting data on multiple years to identify trends. You can duplicate these tables and use them to collect the data on different years using census data.
5. Remember that this is a working document that you, the public health nurse, can adjust and revise to meet the needs of the community you are assessing. The collection of data is more than filling in the boxes. You may need to collect additional data in a particular area, depending on what you learn as you go. For example, you may fill in the boxes about the number of schools in a community, but you may also want to know the number of students per faculty member, if a community collaborator cited that as a concern.
6. In some instances, there will be overlap of data collection. Because information for this tool will usually be collected by a group, in qualitative research the overlap may be considered a saturation of data. In the analysis section, these data will provide a variety of perspectives.

SECTION I PART 1: FOUNDATIONAL HEALTH MEASURES

General Health Status

Refers to information that will inform the public health nurse and partners in the health initiative about the health of the population (U.S. DHHS, 2010d). It is important to note that some of this information is not population focused such as self-assessed health status; however, this is an example of how public health nurses serve individuals in the community as well as the general population.

Section I Part 1

A-1 Individual and Family

When appropriate, the public health nurse will include self-assessed health status as well as history, physical, genogram, ecogram, and any other tools used by his or her organization. Summarize your finding in a narrative form below.

Source of Evidence: _____

Section I Part 1

B-1 Population: Vital Statistics

	Census Tract		Community		County		State	
	#	%	#	%	#	%	#	%
Live births								
General deaths								

Source of Evidence: _____

Section I Part 1

B-2 Population: Mortality

Census Tract	Community	County	State

Source of Evidence: _____

Section I Part 1

B-3 Population: Morbidity

Census Tract	Community	County	State

Source of Evidence: _____

Section I Part 1

B-4 Population: Life Expectancy

Census Tract	Community	County	State	International

Source of Evidence: _____

Section I Part 1

B-5 Population: Healthy Life Expectancy

Census Tract	Community	County	State	International

Source of Evidence: _____

Section I Part 1

B-6 Population: Years of Potential Life Lost (YPLL)

Census Tract	Community	County	State	International

Source of Evidence: _____

Section I Part 1

B-7 Population: Physically and Mentally Unhealthy Days

Census Tract	Community	County	State	International

Source of Evidence: _____

SECTION I PART 2: FOUNDATIONAL HEALTH MEASURES

Health-Related Quality of Life and Well-Being

Health-related quality of life is a complex concept and focuses on “the impact health status has on quality of life” (U.S. DHHS, 2010e). This portion of the PHNAT also focuses on the individual and again sheds light on those public health nurses who do practice on a one-to-one basis with clients in the community.

Section I Part 2

A-1 Individual and Family*—Includes review of the following:

- Patient-Reported Outcomes Measurement Information System (PROMIS) (www.nihpromis.org/default.aspx) tools to measure health outcomes from a patient perspective
- Well-being measures
- Participation measures (activities of daily living, instrumental activities of daily living)

*There is no B in Section I Part 2.

SECTION I PART 3: FOUNDATIONAL HEALTH MEASURES

Determinants of Health

Section I Part 3-1

Biology and Genetics

The determinants of health under biology and genetics include data that are individual/family focused or population focused. The public health nurse gathers the information on the individual and family as a client using whatever health assessment tool he or she uses in the particular academic or clinical setting. Pertaining to the population aggregate, data such as age, race and gender would be considered important to gather.

Section I Part 3-1

A-1 Individual and Family Assessment

In this section, when appropriate, the public health nurse includes an assessment of the individual and family. Include the history, genogram, and ecomogram. Special consideration is given to analysis of genetically defined diseases such as sickle cell anemia, cystic fibrosis, and BRCA1 or BRCA2.

Section I Part 3-1

B-1 Population

	Census Tract	Community	County	State
Population at last census				
Population density				
Population changes in the last 10 years				

Source of Evidence: _____

Section I Part 3-1

B-3 Population: Race Distribution

	Census Tract		Community		County		State	
	#	%	#	%	#	%	#	%
White								
Black/African American								
Hispanic								
Asian								
Native American								
Other								

Source of Evidence: _____

Section I Part 3-1

B-4 Population: Gender Distribution

	Census Tract		Community		County		State	
	#	%	#	%	#	%	#	%
Female								
Male								

Source of Evidence: _____

Section I Part 3-2

Social Factors

Social factors, the next determinant of health to be considered, include social determinants of health and physical determinants or conditions in the environment (U.S. DHHS, 2010b). Social factors that the public health nurse assesses include the client's interactions and connections with family, friends, and others in their community. The second part includes physical determinants. The public health nurse must assess the physical environment of the community at large.

Section I Part 3-2

A-1 Social Determinants: Housing Conditions

Housing Characteristics	Total # of Units	Owner Occupied	Renter Occupied	Vacant	Housing Subsidies/Homeless Provisions

Source of Evidence: _____

Section I Part 3-2

A-2 Social Determinants: Transportation

	Description of Services: Cost, Destination of Service, Quality of Service, Condition of Services and/or Roads, Handicap Accessibility	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)
Train		
Bus		
Taxi including private services		
Major roads		
Minor roads		
Volunteers providing transportation		
School buses		

Source of Evidence: _____

Section I Part 3-2

A-3 Social Determinants: Workplace

List Places of Employment	Description of Workplace Professional, Industry, Factories, Schools, Town, City, County, Businesses	What Workplace Safety Measures Are in Place? What Is the Estimated Yearly Salary Range of Employees?

Additional Questions to Ask:

- Do most people who reside in the community work in the community or do they commute?
- If they commute, what is their mode of transportation?
- What is the cost of that commute?
- What is the time of the commute?
- Does this commute impact quality of life?

Source of Evidence: _____

Section I Part 3-2

A-4 Social Determinants: Recreational Facilities

Recreational Facilities	Area Served/Services Provided, Cost, Population Served, Hours, Maintenance of Recreation Facilities (e.g., parks, playgrounds, athletic fields)	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-2

A-5 Social Determinants: Educational Facilities

	# of Public	# of Private (religious)	# of Private (secular)
Preschool			
Elementary			
Junior high			
Senior high			
Colleges/universities			
Early morning programs			
Recreational programs within school system			
After-school programs			

Source of Evidence: _____

Section I Part 3-2

A-6 Social Determinants: Places of Worship

Name/Address/Phone	Denomination	Services

Source of Evidence: _____

Section I Part 3-2

A-7 Social Determinants: Social Services

Agency Name/Address/Phone (food and clothing banks, homeless shelters, adult day care social services, child care)	Area Served/ Services Provided/ Cost of Services	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-2

A-8 Social Determinants: Library Services

Libraries Name/Address/Phone	Area Served/Services Provided	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-2

A-9 Social Determinants: Law Enforcement

Law Enforcement Services	Area Served/Services Provided, Size, Equipment, Response Time, Types of Calls Over Past 6 Months, Neighborhood Programs	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)
Police force		
Special services (SWAT, bomb squads, emergency response teams)		
Animal enforcement		
Senior watch patrols		
Private security		
Neighborhood watches		
Vigilante groups		

Source of Evidence: _____

Section I Part 3-2

A-10 Social Determinants: Fire Department

Fire Department Stations	Area Served/Services Provided, Number of Companies, Equipment, Response Time, Types of Calls Over Past 6 Months, Community Programs	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)
Fire fighters in company		
Special fire forces (emergency response teams)		

Source of Evidence: _____

Section I Part 3-2

A-11 Social Determinants: Communication

	Description of Services (include whether it is community based, state, or national)	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)
Television (e.g., educational, relaxation, emergency response)		
Radio (e.g., educational, relaxation, emergency response)		
Newsprint (e.g., educational, relaxation, emergency response)		
Internet/social networking/ text messaging (e.g., educational, relaxation, emergency response)		
Newsletters		
Bulletin boards		
Telephone chains		

Source of Evidence: _____

Section I Part 3-2

A-12 Social Determinants: Employment Distribution

	# in Census Track	# in Community	# in County	# in State
Employed persons				
Unemployed persons				

Source of Evidence: _____

Section I Part 3-2

A-13 Social Determinants: Leading Industries in Community (name at least two)

Name	Address	Type	# of Employed

Source of Evidence: _____

Section I Part 3-2

A-14 Social Determinants: Educational Level of People Older Than 25 Years

	Census Tract	Community	County	State
Ninth grade and lower				
High school graduate				
Some college				
College graduate (associate's and baccalaureate)				
Median # of years of school completed				

Source of Evidence: _____

Section I Part 3-2

A-15 Social Determinants: Family Income

	Census Tract	Community	County	State
\$0-5,000				
\$5,000-\$9,999				
\$10,000-\$14,000				
\$15,000-\$24,999				
\$25,000-\$34,999				
\$50,000-\$64,000				
\$65,000-\$79,000				
\$80,000 or more				
	100%	100%	100%	100%

Source of Evidence: _____

Section I Part 3-2

B-1 Physical Determinants: History of the Community

Write a narrative including information about the history of the community you are assessing. Include data that describe who started the community, any interesting stories that define the community.

Source of Evidence: _____

Section I Part 3-2

B-2 Physical Determinants: Windshield Survey

The windshield survey reflects what the public health nurse can view from a car window while driving through a community and contains observations of various components in the community such as housing, open spaces, transportation, race, ethnicity, restaurants, and stores.

Source of Evidence: _____

Section I Part 3-2

B-3 Physical Determinants: The Built Environment

The built environment describes the man-made structures in the community including the kinds of stores, buildings, and sidewalks that facilitate healthy behaviors (or not). Describe your observations about this built environment and how it may be a determinant of health.

Source of Evidence: _____

Section I Part 3-2

B-4 Physical Determinants: Natural Environment

Write a narrative that includes data on factors such as topography, climate, terrain, topographical features, and other factors in the community.

Source of Evidence: _____

Section I Part 3-2

B-5 Physical Determinants: Physical Barriers/Boundaries

Write a narrative that includes data such as geographical boundaries and man-made boundaries.

Source of Evidence: _____

Section I Part 3-2

B-6 Physical Determinants: Environmental/Sanitation/Toxic Substances

	Description of Services (include whether it is community based, state, or national)	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)
Water supply		
Sewage supply		
Solid waste disposal		
Provisions or laws for recycling		
Air contaminants		
Vector control programs for deer, ticks, rabid animals, rodents		
Other		

Source of Evidence: _____

Section I Part 3 -3

Health Services

The determinant of health known as health services is more than a listing of the physical, social, and mental health programs offered to an individual/family or a population in a particular community. It also includes an assessment of access to these services and uses the Seven A's. The Seven A's address more than the single concept of access. Whether or not there is access frequently depends on additional concepts of awareness, availability, affordability, acceptability, appropriateness, and adequacy of the service. Each of these is essential to assess and analyze for whether individuals or populations can access essential services that can influence their health and well-being.

Source of Evidence: _____

Section I Part 3-3

A-1 Acute Care

Agency Name/Address/Phone	Area Served/Services Provided, Cost, Hours, Population Served	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-3

A-2 Home Care

Agency Name/Address/Phone	Area Served/Services Provided, Cost, Hours, Population Served	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-3

A-3 Primary Care

Agency Name/Address/Phone	Area Served/Services Provided, Cost, Hours, Population Served	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-3

A-4 Long-Term Care

Agency Name/Address/Phone	Area Served/Services Provided, Cost, Hours, Population Served	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-3

A-5 Rehabilitative

Agency Name/Address/Phone	Area Served/Services Provided, Cost, Hours, Population Served	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-3

A-6 Assistive Living

Agency Name/Address/Phone	Area Served/Services Provided, Cost, Hours, Population Served	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-3

A-7 Mental Health Services

Agency Name/Address/Phone	Area Served/Services Provided, Cost, Hours, Population Served	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-3

A-8 Occupational

Agency Name/Address/Phone	Area Served/Services Provided, Cost, Hours, Population Served	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-3

A-9 School Health Programs

Agency Name/Address/Phone	Area Served/Services Provided, Cost, Hours, Population Served	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-3

A-10 Dental

Agency Name/Address/Phone	Area Served/Services Provided, Cost, Hours, Population Served	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-3

A-11 Palliative

Agency Name/Address/Phone	Area Served/Services Provided, Cost, Hours, Population Served	Adequate/Inadequate (Analysis of Seven A's will assist with determining adequacy or inadequacy)

Source of Evidence: _____

Section I Part 3-3

B-1 Access to Care

The following Seven A's questions can assist the public health nurse in analyzing his or her findings:

- Is the population aware of its needs and the services in the community?
- Can the population gain access to the services that it needs?
- Is the service available and convenient to the population in terms of time, location, and place for use?
- How affordable is the service for the population in question?
- Is the service acceptable to the population in terms of choice, satisfaction, and cultural congruence?
- How appropriate is the service for the specific population or is there a fit?
- Is there adequacy of service in terms of quantity or degree?

Section I Part 3-3

B-1 Access to Care: Using the Seven A's

	Adequate/ Inadequate	Identify as a Problem Statement
Is the individual/family or population aware of its needs and services in the community?		
Can the individual/family or population gain access to the services it needs?		
Is the service available and convenient for the individual/family or population in terms of time, location, and place for use?		
How affordable is the service for the individual/family or population?		
Is the service acceptable to the individual/family or population in terms of choice, satisfaction, and congruence with cultural values and beliefs?		
How appropriate is the service for the individual/family or population or is there a fit?		
Is there adequacy of service in terms of quantity or degree for the individual/family or population?		

Source of Evidence: _____

Section I Part 3-4

Policymaking

The public health nurse must also assess the policies that influence the health of the individual, family, community, system, and population under study. Examples include policies on seat belt use, helmet use, phone use and texting while driving, and child car seats. Each of these policies has had a positive influence on the health and well-being of individuals and the population at large, resulting in a decrease in disabilities and injuries. The public health nurse must be knowledgeable about how his or her community functions with regard to the political infrastructure and as such must assess this infrastructure to be familiar with how it works: who are the formal and informal political leaders? How can they be reached? What initiatives have they supported in the past? What are the laws that affect the individual/family, population, and community with regard to the public's health? Are these laws upheld? Are there issues that have not been addressed, and, if so, what can be done to address these issues? The data collected in this section include the organizational structure of the community, a description of the political issues in the community, and an identification of some of the public health laws that affect the community and its members' health. As the public health nurse conducts this portion of the assessment, it is important to explore what the local newspapers report, to meet with the local government, and to check out the school boards or any of the governing bodies in that area. Meet the candidates if it is an election year and listen to what the community is saying. Check websites, social networking sites, and local blogs. Using the Internet, here and throughout the PHNAT, assists the public health nurse in obtaining the necessary data and learning about the community.

Section I Part 3-4

A-1 Local, State, and Federal Organizational Structure of Community

In the following table, include organizational structure of the community including political parties of leadership: governor, senators, assemblypersons, mayor, and board.

Once you collect the data, include a narrative and an organizational chart that represents a visual model of the hierarchy.

- Titles
 - Names
 - Method of contact
 - Initiatives supported in the past and presently
 - Interview one of the officials or go to a town board meeting
-

Source of Evidence: _____

Section I Part 3-4

A-2 Political Issues in the Community

Political Issues	Action Taken/Policy

Source of Evidence: _____

Section I Part 3-4

A-3 Health Policies (e.g., seat belts, taxes on tobacco, smoking ordinances, cell phone and texting bans)

Health Policies	Action Taken/Policy

Source of Evidence: _____

SECTION I PART 4: HEALTH CARE DISPARITIES

According to Healthy People 2020, “If a health outcome is seen in a greater or lesser extent between populations, there is disparity. Race or ethnicity, sex, sexual identity, age, disability, socioeconomic status, and geographic location all contribute to an individual’s ability to achieve good health” (2010f, para. 1). Frequently, the public health nurse will note disparities as he or she observes within the community and analyzes the data gathered. Hence, for this foundational health measure much of the information needed is gathered throughout the PHNAT. Summarize your finding in a narrative form below.

SECTION II: ANALYSIS OF HEALTH STATUS

The public health nurse, along with other partnering members of a health initiative, analyzes the information gathered during the assessment process. Many times, the public health nurse will examine past data to see whether trends and patterns have emerged over time. This process of analysis takes time and reflection. The key here is that the public health nurse does not do this alone. It is a process that takes shape and form in the partnership. From this process the issues in a community are identified and priorities are set. Summarize your findings below identifying community needs, topics, and objectives.

SECTION IV AND SECTION V: PLAN AND IMPLEMENTATION USING MINNESOTA INTERVENTION WHEEL STRATEGIES

Tracking and Evaluation

Minnesota Intervention Strategies and Levels of Practice				
Interventions	Levels of Practice			
	Individual/Family/ Population	Community	System	Track and Outcome Evaluation
Surveillance				
Disease and health threat investigation				
Outreach				
Screening				
Case-finding				
Referral/follow-up				
Case management				
Delegated functions				
Health teaching				
Counseling				
Consultation				
Collaboration				
Coalition building				
Community organizing				
Advocacy				
Social marketing				
Policy development and enforcement				

SECTION VI: REFLECTION

This final section reminds the public health nurse to be reflective in his or her practice. This section can be completed throughout the PHNAT process. Some of the questions that the public health nurse may ask include the following:

- What am I observing?
- What am I hearing?
- Am I seeing and hearing all that needs to be seen and heard?
- What am I missing?
- What feelings am I experiencing during this assessment process?
- Are these feelings facilitating this assessment or creating a barrier to the assessment?
- Are these feelings hindering the development of the partnership and the development of trust?
- Am I engaging in activities that help in mobilizing the community of interest?

A. Reflection Gained During Public Health Nursing Assessment

Date	Reflection