Massachusetts
Quadrennial PHN Survey
2009

This survey enables MAPHN to develop a profile of PHNs and public health nursing services.

- It is anticipated that the following 20 questions can be answered in 15-20 minutes.

- The information collected through this PHN Survey will be aggregated so that no one individual nurse, city/town or other entity is identifiable.

Your cooperation in completing this Survey strengthens the voice of Public Health Nursing

Each PHN is to complete a Survey

Thank You

www.maphn.org
This basic identifying information for the nurse and town will only be used to verify and update the information for the next MAPHN Directory.

MAPHN Directory Information

Town(s)
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Name of Nurse (please print)
____________________________________________________

Name of Employer
____________________________________________________

Employer Address
(# and Street) _________________________________________

City _______________________ State _____ Zip ____________

Work Phone ___________________ Fax ____________________

Email ________________________________
Have you visited the Massachusetts Association of Public Health Nurses web site?

If ☐ Yes

How often?

☐ weekly ☐ monthly

☐ Other __________________________

For what purpose?

☐ Conference ☐ Education
☐ Meeting Info ☐ News
☐ Membership ☐ PHN Directory
☐ Calendar

☐ Other __________________________

If ☐ No - then please visit, www.maphn.org

**Employment**

1. Type of Employer

☐ Local Board of Health ☐ Non-Profit Nursing Agency

☐ Other __________________________

Is your Board of Health regionalized or planning to be regionalized?

☐ Yes ☐ No

2. Job Title __________________________

3. How long have you been employed in this position?

_______ years or _______ months
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4. How many hours are you scheduled to work per week?
   - 1-4 hrs
   - 5-8 hrs
   - 9-12 hrs
   - 13-16 hrs
   - 17-20 hrs
   - 21-24 hrs
   - 25-28 hrs
   - 29-32 hrs
   - 33-36 hrs
   - 37-40 hrs
   How many additional hours/week do you work? _______ hours
   Are these additional hours  □ paid  □ unpaid

5. Please indicate your hourly pay rate
   - $15 or less
   - $16 - $20
   - $21 - $25
   - $26 - $30
   - $31 - $35
   - $36 - $40
   - $41 or more

   Has the hourly rate of pay  □ increased in the past 4 years
   □ decreased in the past 4 years
   □ stayed the same

Benefits offered by your Employer (check all that apply)
   - Paid mileage when you use your own vehicle for work related travel
   - Access to a town vehicle for work related travel
   - Uniform allowance
   - Memberships to Professional Organizations
   - Reimbursement for Professional Development (CEUs)
   - Tuition Reimbursement
   - Health insurance   ______ % paid by employer
   - Paid vacation
   - Paid sick time
   - Other __________________________
   - Other __________________________

Are you a member of a Union?  □ Yes, name of Union ________________
Age – Education - Experience

6. Please indicate your age group as of today.

- [ ] 29 or less
- [ ] 30 – 39
- [ ] 40 – 49
- [ ] 50 - 59
- [ ] 60 - 69
- [ ] 70+

Do you plan to retire in the next
- [ ] 2 years (in 2012)
- [ ] 4 years (in 2014)

Comment

7. Please indicate your educational credentials. (Check all that apply)

- [ ] Associates Degree
- [ ] Diploma Graduate
- [ ] Bachelor of Science in Nursing BSN
- [ ] Bachelor of Arts
- [ ] Bachelor of Science
- [ ] Master’s Degree
- [ ] Nurse Practitioner
- [ ] Masters in Public Health
- [ ] Doctorate
- [ ] Other degrees or certifications

List your highest degree

8. Do you speak another language? [ ] No

If [ ] Yes, indicate language(s) in addition to English

_______________________________________________________________

_______________________________________________________________

9. Indicate number of years you have been employed in public health.

______ years _____ months

10. Indicate number of years you have been employed as a nurse.

______ years _____ months
11. Do you have education or practice in any of the following areas (mark all that apply)

- [ ] acute care
- [ ] addictions
- [ ] adolescence
- [ ] administration
- [ ] cardiology
- [ ] developmental delays
- [ ] diabetes
- [ ] emergency/trauma
- [ ] environmental health
- [ ] faculty school of nursing
- [ ] gay lesbian bisexual transgender health
- [ ] health education
- [ ] HIV/AIDS
- [ ] home health/VNA
- [ ] hospice
- [ ] infectious disease
- [ ] international health
- [ ] long term care
- [ ] maternal child health
- [ ] men’s health
- [ ] mental health
- [ ] obstetrics
- [ ] oncology
- [ ] parish nursing
- [ ] pediatrics
- [ ] rehabilitation
- [ ] school nursing
- [ ] women’s health

Comments ____________________________________________________________

_________________________

Do you have a hard copy binder from 2002? □ Yes □ No
Do you have a hard copy binder from 2006? □ Yes □ No
Did you download it from the MAPHN website? □ Yes □ No

Comment __________________________________________

13. Screenings/Clinics/Program areas (check all that apply in your current position)

Below is a list of the modules/competencies from the *Public Health Nursing Leadership Guide*. This is not meant to be a comprehensive list, if there are activities from your practice not listed please write them in the other category.

□ Adult and Child Immunizations for School
□ Atmosphere and Indoor Air Quality
□ Biohazardous Waste Disposal

□ Blood Lead Screening, Prevention and Education
□ Blood Pressure Screening Clinics
□ Breast and Cervical Cancer Screening

□ Burial Permits
□ Camp Inspections
□ Cholesterol Lipid Profile Screening

□ Child Safety/Injury Prevention
□ Colorectal and Testicular Cancer Screenings
□ Community Health Network Area (CHNA) Participation

□ Communicable Disease Investigations
□ Community Resources and Referrals
□ Dental Screening

□ Diabetes Screening
□ Hepatitis A Vaccine
□ HMO Senior Plan reimbursement Program Access Assistance

□ Home Visits for General Health Supervision
□ Human Host Infections
□ Immunization Clinics
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☐ Influenza Pandemic Planning
☐ International Travel Immunizations
☐ Latex Allergies in Practice Settings

☐ Medicare Reimbursement for Influenza and Pneumococcal Vaccine
☐ Rabies Animal Clinics
☐ Rabies Prevention in Humans

☐ School Health Services to Private Schools
☐ Smoking Cessation Assessment and Referral
☐ Tuberculosis Nursing Case Management

☐ Tuberculosis TB Testing
☐ Universal Precautions
☐ Vaccine Management Business Improvement Program

☐ ______________________   ☐ ______________________

☐ ______________________   ☐ ______________________

☐ ______________________   ☐ ______________________

Population Health

14. List the towns you serve and the total number of paid PHN hrs/week/town or city. If you do not know the simply write in do not know (DNK).

Circle if hours: ↑ increased, ↔ stayed the same, ↓ decreased from 2005.

town #1 ______________________  total # of PHN hrs/wk _________  ↑ ↔ ↓
town #2 ______________________  total # of PHN hrs/wk _________  ↑ ↔ ↓
town #3 ______________________  total # of PHN hrs/wk _________  ↑ ↔ ↓
town #4 ______________________  total # of PHN hrs/wk _________  ↑ ↔ ↓
town #5 ______________________  total # of PHN hrs/wk _________  ↑ ↔ ↓

Comments ____________________________________________________________
Public Health Interventions II:
Application to Public Health Nursing

Section of Public Health Nursing
Minnesota Department of Health
Surveillance: describe and monitor health events through ongoing and systematic collection, analysis and interpretation of health data for the purpose of planning, implementing and evaluating public health interventions. [Adapted from MMWR 1988]

Disease and Health Event Investigation: systematically gathers and analyzes data regarding threats to the health of populations, ascertain the source of a threat, identify cases and others at risk, and determines controls.

Outreach: locate populations-of-interest or populations-at-risk and provides information about the nature of the concern, what can be done about it, and how services can be obtained.

Screening: identify individuals with an unrecognized health risk factors or asymptomatic disease condition in populations.

Case Finding: locates individuals and families with identified risk factors and connect them with resources.

Referral and Follow-up: assists individuals, families, groups, organizations, and/or communities to identify and access necessary resources to prevent or resolve problems/concerns.

Case Management: optimizes self-care capabilities of individuals and families and the capacity of systems and communities to coordinate and provide services.

Delegated Functions: direct care tasks a registered professional nurse carries out under the authority of a health care professional as allowed by law. Delegated functions, also include direct care tasks a professional nurse entrusts to other appropriate personnel to perform.

Health Teaching: communicates facts, ideas and skills that change knowledge, attitudes, values, beliefs, behaviors, and practices of individuals, families, systems, and/or communities.

Counseling: establishes an interpersonal relationship with a community, a system, families or individual intended to increase or enhance their capacity for self-care and coping. Counseling engages the community, a system, family or individual at an emotional level.

Consultation: seek information and generates optional solutions to perceived problems or issues through interactive problem-solving with a community, system, family or individual. The community, system, family or individual selects and acts on the option best meeting the circumstances.

Collaboration: commits two or more persons or organizations to achieve a common goal through enhancing the capacity of one or more of the members to promote and protect health.

Coalition Building: Promotes and develops alliances among organizations or constituencies for a common purpose. It builds linkages, solves problems, and/or enhances local leadership to address health concerns.

Community Organizing: health community groups to identify common problems or goals, mobilize resources and implement strategies for reaching the goals they collectively set.

Advocacy: plead someone’s cause or act on someone’s behalf, with focus on developing the community, system, individual or family’s capacity to plead their own cause or act on their own behalf.

Social Marketing: utilize commercial marketing principles and technologies to influence the knowledge, attitudes, values, beliefs, behaviors, and practices of the population-of-interest.

Policy Development and Enforcement: place health issues on decision-maker’s agendas, acquire a plan of resolution, and determine needed resources. Policy development results in laws, rules and regulations, ordinances, and policies. Policy enforcement compels others to comply with laws, rules, regulations, ordinances and policies related in conjunction with policy development.
15. Age of populations served in your practice (check all that apply)

☐ Less that one year of age  ☐ 1-5 years of age
☐ School age  ☐ Adolescents
☐ Adults 19-49  ☐ Adults 50+
☐ Pregnant women  ☐ Other

Scope of Practice

16. Interventions are actions a PHN takes to improve the health of populations and may be directed to individuals and their families, communities or the systems that impact the health of communities. Indicate the interventions, actions you perform to impact the health of the population of your city of town.

☐ Surveillance: describe and monitor health events through ongoing and systematic collection, analysis and interpretation of health data for the purpose of planning, implementing and evaluating public health interventions.

☐ Disease and Health Event Investigation: systematically gather and analyze data regarding threats to the health of populations, ascertain the source of a threat, identify cases and others at risk, and determine control measures.

☐ Outreach: locate populations-of-interest or populations-at-risk and provide information about the nature of the concern, what can be done about it, and how services can be obtained.

☐ Screening: identify individuals with an unrecognized health risk factors or asymptomatic disease condition in populations.

☐ Case Finding: locate individuals and families with identified risk factors and connect them with resources.

☐ Referral and Follow-up: assist individuals, families, groups, organizations, and/or communities to identify and access necessary resources to prevent or resolve problems/concerns.

☐ Case Management: optimizes self-care capabilities of individuals and families and the capacity of systems and communities to coordinate and provide services.

☐ Delegated Functions: direct care tasks a registered professional nurse carries out under the authority of a health care professional as allowed by law or delegated functions, also includes any direct care tasks a professional nurse entrusts to other appropriate personnel to perform.
Public Health Nursing Survey 2009

- **Health Teaching:** communicate facts, ideas and skills that change knowledge, attitudes, values, beliefs, behaviors, and practices of individuals, families, systems, and/or communities.

- **Counseling:** establishes and interpersonal relationship with a community, a system, families or individual intended to increase or enhance their capacity to for self-care and coping. Counseling engages the community, a system, family or individual at an emotional level.

- **Consultation:** seek information and generate optional solutions to perceived problems or issues through interactive problem-solving with a community, system, family or individual and then the community, system, family/individual acts on the option best meeting the needs.

- **Collaboration:** commit two or more persons or organizations to achieve a common goal through enhancing the capacity of one or more of the members to promote and protect health.

- **Coalition Building:** promote and develop alliances among organizations or constituencies for a common purpose. Coalitions build linkages, solve problems, and/or enhance local leadership to address health concerns.

- **Community Organizing:** help community groups to identify common problems or goals, mobilize resources and implement strategies for reaching the goals they collectively set.

- **Advocacy:** plead someone’s cause or act on someone’s behalf, with a focus on developing the community, system, individual or family’s capacity to plead their own cause or act on their own behalf.

- **Social Marketing:** utilize commercial marketing principles and technologies to influence the knowledge, attitudes, values, beliefs, behaviors, and practices of the population-of-interest.

- **Policy Development and Enforcement:** place health issues on decision-maker’s agendas, acquire a plan of resolution, and determine needed resources. Policy development results in laws, rules and regulations, ordinances, and policies. Policy enforcement compels other others to comply with laws, rules, regulations, ordinances and policies created in conjunction with policy development.
17. What is the average number of hours per month that you are participating in emergency preparedness/bioterrorism EP/BT planning and training?

_______ hrs/month in EP/BT

Has your participation changed since 2005?

☐ Yes  ☐ No

If yes, Please explain

________________________________________________________________________
________________________________________________________________________

18. Have you attended any of the following training sessions?

Incident Command System (ICS)  ☐ Yes  ☐ No
Risk Communication  ☐ Yes  ☐ No
Behavioral Health Disaster Response  ☐ Yes  ☐ No
Smallpox Vaccination  ☐ Yes  ☐ No
Pandemic Influenza  ☐ Yes  ☐ No
Mass/Emergency Dispensing Site  ☐ Yes  ☐ No
Strategic National Stockpile (SNS)  ☐ Yes  ☐ No
Bioterrorism Agents  ☐ Yes  ☐ No
Personal Protective Equipment  ☐ Yes  ☐ No
18. Training Sessions Attendance (Continued)

Health and Homeland Alert Network (HHAN)  □ Yes □ No
National Incident Management System (NIMS) □ Yes □ No
Homeland Security Exercise and Evaluation Program (HSEEP) □ Yes □ No
Noble Training Center in Alabama □ Yes □ No

If yes, list the training ________________________________

19. Are you actively involved in your local or regional emergency planning activities e.g. Local Emergency Planning Council (LEPC), Medical Reserve Corps (MRC)?

□ Yes □ No

20. In the past year, have you participated in drills or exercises?

□ Yes □ No

If Yes, what were the scenarios; Pan Flu, Emergency Dispensing Sites using Flu Clinics or other scenarios? Please note:

________________________________________________________________________

Please list other EP/BT training topics that you would like to see offered.

________________________________________________________________________

THANK YOU for completing the PHN Survey!

Return this Survey to MAPHN
c/o Kaydee Schmidt
62 Churchill Street
Milton, MA 02186

www.maphn.org