

Nursing Counts appears in the *American Journal of Nursing* as a periodic column provided by the Hartford Institute for Geriatric Nursing, the Division of Nursing, New York University, New York City.

## Counting Nurses: What is Community Health–Public Health Nursing?

*A nursing specialty and a care setting.*

Many nurses have difficulty identifying the community health–public health (CH–PH) nurse workforce because CH–PH is both a nursing specialty and a care setting. A lack of agreement exists as to what constitutes a CH–PH setting. The National Sample Survey of Registered Nurses 2000 included the following as public or community health settings: state health departments, visiting nurse services, community or neighborhood health centers, day care centers, and hospices, among others. School health, occupational health, and ambulatory care were listed separately, although care in these settings is usually included in undergraduate and graduate CH–PH courses. Thus, nursing care provided to older adults in a physician’s geriatric practice was classified as occurring in an ambulatory care setting, whereas the same care given to the same patients in a community health center or in their homes was classified as CH–PH.

All baccalaureate nursing programs provide specific education in CH–PH, whereas specialty education occurs at the master’s degree level, primarily

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### Facilities or organizations employing newly licensed RNs

| Type of Facility or Organization | 1999<br>(n = 1,385)<br>%* | 1996<br>(n = 1,472)<br>%* |
|----------------------------------|---------------------------|---------------------------|
| Hospital                         | 86.6                      | 58.0                      |
| Subacute Care                    | 0.7                       | 3.4                       |
| Long-term Care                   | 7.1                       | 24.3                      |
| Community-based Care             | 4.4                       | 5.6                       |
| Other                            | 1.1                       | 8.6                       |

\*Percentages were based on the number of valid responses. "Private practice" was not used in 1999; 1996 data from that category were combined into "other."

Source: Hertz JE, et al. *Linking the NCLEX-RN national licensure examination to practice: 1999 practice analysis of newly licensed registered nurses in the United States*. Chicago: National Council of State Boards of Nursing; 2000.

in nursing programs but also in schools of public health. Certification as a generalist or specialist can be obtained through the American Nurses

Credentialing Center (visit [nursingworld.org/ancc](http://nursingworld.org/ancc) to obtain more information).

In 1999, the last year for which national data are avail-

### FAST FACTS

- ▼ In 1998, 84% of nursing assistants, 59% of LPNs and LVNs, and 45% of RNs in CH–PH settings provided direct nursing care to patients aged 65 to 85.
- ▼ Of RNs working in community health settings in 1998, 25% had baccalaureate degrees in nursing, 30% had associate’s degrees, and 26% had nursing diplomas.
- ▼ In 1997, 40% of home health care users were 75 to 84 years old and 26% were aged 85 or older.

Sources: National Council of State Boards of Nursing. Data collection completed for 1998 role delineation study. Issues 1999;20(1); Health Care Financing Administration. *A profile of Medicare home health: chart book*. Baltimore (MD): The Administration; 1999. HCFA Pub. No. 10138.

able, 4.4% of newly licensed RNs worked in community-based care (see *Facilities or Organizations Employing Newly Licensed RNs*, page 59). The Bureau of Labor Statistics estimates that the demand for RNs in ambulatory care will increase 21% to 35% through 2008, at a rate faster than the average for all occupations;

employment in home health care is also expected to grow rapidly. But those estimates may be inflated, given that Medicare spending for home care decreased by 32% from 1998 to 1999 (primarily as a result of the 1997 Balanced Budget Act) and that the Health Care Financing Administration reported a decline of 133,000 home health full-time

equivalents (including all employees, not just RNs) between 1997 and 1999.—*Christine Kovner, PhD, RN, FAAN*

Sources: Bureau of Labor Statistics. *Occupational outlook handbook*. Bulletin No. 2520. 2000-01 ed. Washington (DC): Department of Labor; 2000; *Basic statistics about home care*. National Association for Home Care. 2000. [www.nahc.org/Consumer/hcstats.html](http://www.nahc.org/Consumer/hcstats.html).

## CH-PH Nursing and Older Adults

*Elders fare less well in public health efforts.*

CH-PH nursing synthesizes community-nursing principles with a population-based approach addressing issues such as teen pregnancy, student health, substance use, and homelessness.

As our senior population increases, more opportunities are available for CH-PH nurses to promote health and prevent disease among older adults, especially those over age 85. *Healthy People 2010* reports that in the United States in 1998, approximately two-thirds of community residents aged 85 and older had been immunized against influenza and 40% were vaccinated against pneumonia. (The National Health Promotion and Disease Prevention target for 2010 is 90% for each.) In 1997, only 12% of adults aged 65 and older participated in at least one health promotion activity, such as an exercise class. (The 2010 target is 90%.) Older people fare worse in public health efforts aimed at adults in general. For

example, in 1998, close to 50% of adults aged 18 to 44 had received formal diabetes education compared with only 27% of adults aged 75 years and older. (The 2010 target is 60%.)

### Preparing the Nursing Workforce. Articles to read:

Gebbie KM, Hwang I. Preparing currently employed public health nurses for changes in the health system. *Am J Public Health* 2000;90(5):716-21.

Mezey M, et al. Enhancing geriatric nursing scholarship: specialization versus generalization. *J Gerontol Nurs* 2000; 26(7):28-35.

CH-PH nursing can yield significant improvements in health outcomes among older adults. However, the development of public health programs for this population is hampered by insufficient data on the number, distribution,

and preparation of nurses who work in community and public health settings and an almost total lack of information about CH-PH nurses in particular. Nurses constitute the largest group of health care professionals practicing in public health. Moses reports that of the approximately 280,000 nurses in CH-PH nursing in 1996, about 60,000 worked in state or local health departments.

If we are to address the nation's pressing public health needs, specifically those of older adults, efforts to more accurately describe CH-PH nurses are critical. —*Mathy Mezey EdD, RN, FAAN*

Sources: Department of Health and Human Services. Office of Disease Prevention and Health Promotion. *Healthy people 2010* [Web site]. 2000. [www.health.gov/healthypeople](http://www.health.gov/healthypeople); Moses EB. *The registered nurse population: March 1997. Findings from the National Sample Survey of Registered Nurses*. Rockville (MD): Department of Health and Human Services; 1996; Gebbie KM, Hwang I. Preparing currently employed public health nurses for changes in the health system. *Am J Public Health* 2000;90(5):716-21.▼