

Community Health Nursing Program

Legislative Briefing

January 2011

Developed by:

Community Health Nursing Program

Public Health and Clinical Services

Nevada State Health Division

Department of Health and Human Services

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Community Health Nursing Program

Historical information

In the late 1800's/early 1900's, the Board of Health hired nurses as a means of controlling smallpox and other communicable diseases. It also hired inspectors to provide inspections of the itinerant worker's camps for sanitation issues as a means of further controlling the spread of disease.

A greater emphasis was placed on Public Health Nursing in the 1930's with the beginning of the polio epidemics. Many of the public health nursing activities of the time were also performed by other units of what was then the State Health Department.

During the 1970s and 1980s Nevada had a very strong state funded public health department providing maternal and infant health, programs to prevent sexually transmitted diseases and services to monitor and control tuberculosis. During the late 1970s and into the 1980s there was a substantial shift from local and state funding to federal funding resulting in a major decline in the fiscal support from the state for Public Health nursing.

Overview

The Community Health Nursing (CHN) Program operates under the direction of the Public Health and Clinical Services Unit in the Nevada State Health Division, Department of Health and Human Services. The CHN Program has a total of fourteen (14) clinics located in eleven (11) of the fourteen (14) rural/frontier counties in Nevada, covering approximately 95,000 miles in area. As the public health authority for all rural counties, Storey, Elko and Eureka counties may call on the CHN program for local support during an outbreak response or mass vaccination event.

Mission Statement

The Community Health Nursing Program, as the sole provider of public health nursing in Nevada's frontier and rural counties, endeavors to promote optimal wellness through the delivery of public health nursing, preventive health care and health education.

Services

The CHN program clinics provide a variety of nursing services which include:

- Family planning - education, counseling, and birth control methods
- Health education
- Cancer screening – limited to breast, cervical and testicular, and moderate screening for colorectal cancer.
- Immunizations – birth through adults
- Well-child exams to include fluoride varnish for teeth and blood lead testing
- Sexually transmitted disease testing, treatment, education and counseling
- HIV/AIDS counseling, education, testing and referrals
- Communicable disease investigation and treatment
- Tuberculosis (TB) screening, education, contact investigations and treatment (includes direct observation therapy on a daily basis for all active TB patients)
- School health promotion and education (some staff also perform the duties of the school nurses in those school districts that do not have a full time staff nurse)

In accordance with NRS 441A and the TB treatment guidelines set by the Centers for Disease Control and Prevention (CDC), all persons who are diagnosed with active TB are required to remain in isolation and receive daily medication therapy. In many of these cases, the CHN staff person is required to travel to the individual's residence on each work day to observe the person ingesting his prescribed medications. The treatment regime is an average of 6 months or longer, depending on lab results on specimens obtained from the infected individual.

All residents of rural Nevada are eligible to receive services in the CHN clinics. Fees for services are based on a sliding scale fee, but no individual is denied services due to an inability to pay under the family planning program. The program does ask for donations when clients fall into that poverty level category.

The CHN program staff consists of four (4) advance practice nurses (APN) and eleven (11) registered nurses (RN) who all work under the direction of the State Health Officer, Dr. Tracey D. Green. The APNs are able to perform women's health exams, to include cervical cancer screening and breast exams, as well as prescribe birth control methods. Two (2) of the APNs are able to perform advanced cervical exams, obtaining biopsies as well as treatment of the cervix in certain cases. Seven (7) of the RNs have received advanced training and are able to test and treat sexually transmitted diseases. All nursing staff members are able to provide each of the other services offered. The nursing staff travels an average of 1,500 miles per month to ensure that clients are able to receive services in each clinic site.

During SFY10, there were a total of 41,601 services provided to clients in the CHN clinics. These services included:

- 5,046 were for family planning
- 17,755 for immunizations
- 783 for well child exams
- 1,151 for TB services
- 1,064 for cancer screening
- 10,578 for flu vaccine

There were also a total of 429 services provided for Substance Abuse Prevention and Treatment Agency (SAPTA) clients and 720 school based services provided in those locations where the CHN nursing staff also fills the role of the school nurse.

Other CHN Staff Functions

CHN program staff are also directly involved in emergency preparedness activities at the county level. CHN staff attends local emergency preparedness committee (LEPC) meetings and assists the Nevada State Health Division Public Health Preparedness Program (PHP) in the coordination of efforts between state and county in a response to any either man-made or natural disasters (e.g. H1N1 pandemic in 2009). CHN staff transported anti-viral drugs to the entire frontier and rural counties within the designated timeframe set forth by the Governor. Staff were also responsible for storage of H1N1 vaccine and related supplies, as well as assisting the state PHP by arranging for sites to be used to administer mass vaccinations to the general public and enlisting local volunteers to assist during the event. During these events staff continued providing direct services to the public.

In many of the rural and frontier counties the CHN nursing clinic is the only provider of the federally funded Vaccines for Children (VFC) program. This program provides children 0 – 18 years all recommended vaccinations free to children of families who are either uninsured or underinsured. Nevada has ranked among the five states with the lowest immunization rates and 50th in access to preventative health care for children.

CHN staff collaborates with SAPTA by providing education, counseling and testing for both HIV and TB for all SAPTA staff and all clients enrolled in agency programs throughout the rural and frontier counties.

One of the core functions of the CHN program is to assist the Health Division Epidemiology Program in investigating communicable disease outbreaks in the rural/frontier counties. These investigations include interviewing the index case individuals as well as all of their contacts and coordinating efforts for testing and

treatment of all individuals involved. An investigation of this type can be very time consuming and labor intensive.

The nursing staff are instrumental in organizing “back-to-school” vaccination clinics, as mandated by state law (NRS 439), within their communities working in collaboration with the school nurses and statewide immunization coalitions.

The CHN Nursing program is working closely with various programs within the Health Division to ensure that all preventive health care services are available to the residents of the rural and frontier counties. These programs include Oral Health; Women, Infant, and Children (WIC); and Maternal Child Health. Through these efforts, the CHN program hopes to increase the number of children seen in the clinics for well-child exams, application of fluoride varnish to the surface of the teeth as a means of preventing dental caries, screening for anemia and blood lead levels as well as increasing the immunization rates overall.

In compliance with NAC 441A.800 to 441A.815, one of the CHN clinics provides the local sex workers with the required weekly specimen collection for cervical swabs to be tested for the presence or absence of gonorrhea and *Chlamydia trachomatis* as well as monthly blood draws to be tested for the presence or absence of the HIV and syphilis.

Funding sources

Presently, the CHN program is funded through eighteen (18) various funding streams with the major portion of the federal funds coming from the federal Title X Family Planning Project grant monies. The CHN program will be losing two (2) major funding streams that existed during the last biennium – United Health Settlement funds and Temporary Assistance for Needy Families (TANF). In addition, the program will experience a reduction in Preventive Health and Human Services Block Grant dollars.

Another major funding source for the CHN program is the County contribution. Each county provides the CHN program with the actual facility to house the clinic, the administrative support staff for the clinic (in all but two counties), the cost of utilities for the clinic as well as providing a percentage for the professional nurse’s salary.

Conclusion

The CHN nursing program functions as the conduit for many of the programs within the Health Division by providing the actual service to the targeted populations.

Any decrease in CHN staff would directly impact the amount of services provided to the citizens of rural and frontier Nevada. In the recent past, Nevada has experienced a variety of outbreaks in various regions of the state; many of which were classed as

“vaccine preventable diseases” e.g. pertussis and varicella (chicken pox). Nevada could conceivably experience larger scale outbreaks in the future in the event that statewide immunization rates were to drop to a lower level than we currently experience.

Due to the current recession, Nevada has experienced some of the highest unemployment rates in state history and Medicaid has experienced a record number of applications across the state. Families are losing their insurance coverage and are unable to pay for emergent medical care not to mention preventive care. Even people who have insurance often can't get covered services due to the distance to providers, increased co-pays and reduced incomes. The CHN nursing clinics are able to provide low cost, preventive health care to those individuals. By providing this type of health care, most conditions can be identified and referred early in the disease process thus preventing costly, long term care and treatment. The economic challenges faced by the state, and in the rural counties, have impacted the program's ability to collect fees at the time of service.

In the absence of services provided by the CHN Program, it can be anticipated that the health care costs will increase for Medicaid, Nevada Check Up, county indigent programs and private insurers.