1. Safety and infection control
   a. Infection control: identifying an infection requiring contact precautions
      - Respiratory syncytial virus
      - Shigella
      - Herpes simplex
   b. Emergency preparedness: disaster preparedness
      - Disaster drills replicate possible scenarios in the local area and enhance preparedness of the community members, government agencies, health care facilities, and businesses
      - Setting up a communication protocol is an important part of community disaster planning. The communication plan should provide for access to emergency agencies, such as the American Red Cross and state and federal government agencies
      - Individual and family disaster preparedness include creating an action plan and determining alternative methods of communication, highlighting possible evacuation routes, identifying local and distant meeting places, and creating a disaster kit.
   c. Emergency preparedness: priority action to develop disaster plan
      - Develop a disaster response plan based on the most probable disaster threats
      - Identify the community disaster warning system and communication center and learn how to access it.
      - Identify the community's first responders' disaster plan
2. Management of care
   a. Epidemiology and communicable disease: reporting infectious prenatal conditions
      - The community health nurse engages in communicable disease surveillance, which includes the systematic collection and analysis of data regarding infectious diseases.
      - Descriptive epidemiology is used to investigate disease patterns to identify whom it affected, where the issue is located, how it occurs, why or what the cause is, and when the condition started.
      - Reporting of communicable diseases is mandated by state and local regulations, and state notification to the CDC is voluntary.
   b. Information technology: understanding HIPPA regulations
      - Only health care team members directly responsible for a client's care can access that client's record. Nurses cannot share information with other clients or staff not caring for the client.
      - Clients have a right to read and obtain a copy of their medical record
      - Nurses cannot photocopy any part of a medical record except for authorized exchange pf documents between facilities and providers.
   c. Continuity of care: priority action during a home visit
      - Safety concerns
      - Acute care

- Providing education
    d. Care of specific populations: migrant population
        - Often have a waiting period to receive financial assistance for medical care
        - Unauthorized immigrants are only eligible for immunizations, school lunch, treatment for communicable disease, and emergency care
        - Use cultural competence when planning care
    e. Practice settings and nursing roles in the community: evaluating client understanding of hospice care
        - Helping the family transition from an expectation of recovery to acceptance of death is an important aspect of providing hospice care. The hospice nurse can continue to work with the family for up to 1 year following the death of the client
        - Focuses on enhancing the quality of life through the provision of palliative care, supporting the client and family through the dying process, and providing bereavement support to the family following the client's death.
        - Clients can receive hospice care in a variety of settings, including home, hospice centers, hospitals, and long-term care settings
3. Health promotion and maintenance
    a. Substance use and addictive disorders: expected findings of heroin intoxication
        - Slurred speech, impaired memory, pupillary changes
        - Decreased respirations and level of consciousness, which can cause death
        - Maladaptive behavioral or psychological changes, including impaired judgment or social functioning
    b. Older adults (65 years and older): Priority findings during a visual screening
        - Eye examination for glaucoma and other disorders
        - Decline in visual acuity
        - Decreased ability for eyes to adjust from light to dark, leading to night blindness, which is especially dangerous when driving
    c. Care of specific populations: detecting the effects of pesticide exposure
        - Higher rates of respiratory complications from exposure to pesticides and chemicals
        - Impaired fetal development can occur among pregnant women exposed to pesticides, even from secondary exposure
        - Educate regarding measures to reduce exposure to pesticides (Hand washing after working, washing food picked from fields before consumption, changing clothes after work).
4. Psychosocial integrity
    a. Nursing process: providing family counseling
        - Establish priorities and optimal outcomes of care they can readily measure and evaluate. These established priorities and outcomes of

client care then direct nurses in selection interventions to include in a plan of care to promote, maintain, or restore health

- Therapeutic interventions- observing, active listening, nonverbal communication.
- Determine the effectiveness of the nursing care plan. They collect data based on the outcome criteria then compare what actually happed with the planned outcomes