LIVEWELLNURSING

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NURSES NOTES DR DENISE FOSTER, CNO

The goal is to turn data into information and information into insight - Carly Fiorina

All nurses are familiar with the Nursing Process and many of you still bear the calluses of writing zillions of care plans in nursing school. I hope not to bring up bad memories of late night study sessions, but it is important to remember that the nursing process is the fundamental framework for our practice. Step-by-step, we move through the process to develop and implement a plan of action. We begin by collecting pertinent data and turning that data into a story about the patient or client. Our sources of data may vary depending on the conditions, but we always look for the most relevant, timely and person-centered sources. We identify and leverage the strengths, and we seek to understand and mitigate the weaknesses. As with all we do in nursing, we take a

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holistic approach and consider both quantitative and qualitative data sources and always consider how the dynamic nature of all beings and circumstances. The science of nursing is selecting and collecting data and the art is turning that data into insight and awareness towards healing and wellness.



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CHIEF NURSING OFFICER (CNO)



EXPERIENTIAL LEARNING AT THE CONVENTION CENTER

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RESOURCES

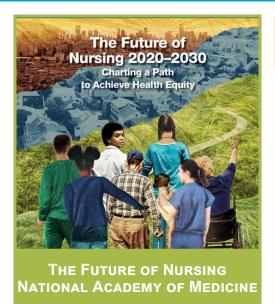
- American Nurses Association—https://www.nursingworld.org/
- Association of Public Health Nurses—https://www.phnurse.org/
- California Board of Registered Nursing—https://www.rn.ca.gov/
- Centers for Disease Control and Prevention—https:// www.cdc.gov/

FUTURE OF NURSING: WHERE ARE WE HEADED? PAULINA BOBENRIETH, INTERIM ASSISTANT CNO

So where are we headed as nurses? The Future of Nursing 2020-2030 report outlines a future where nurses will have an even greater role in advancing health equity in all communities. The good news is that we are already doing this work in partnership with other colleagues throughout the COSD.

Nurses are providing lifesaving services for the elderly and newborns, and through the human life span. We provide needed services in prisons, clinics, hospitals, facilities, schools, homes and in the community where people work, play, worship and live. Nurses know the lived experience of the people we serve, and have the leadership capacity, education, and holistic background to advocate for equitable access to health for all people in all communities.

According to the World Health Organization, health equity is achieved when everyone can attain their full potential or health and well-being. To reach this goal, we will need to deepen our understanding of equity, inclusion, diversity, racism, and cultural humility. In this newsletter, we will explore these concepts, provide resources, and create practical applications.



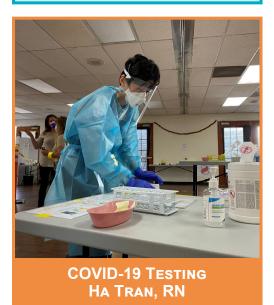
SUBMISSION GUIDELINES

- Please e-mail submissions (articles, ideas, photos, trainings, dates, accolades, local or national news, etc.) to
 America.gonzalezcastaneda
 @sdcounty.ca.gov
- For consideration in the next issue, please submit entries by close of business on the 1st or 3rd Tuesday of each month.
- Submission limits: 100-200 words.
- Include pictures representing your submission with caption

TESTING FOR COVID-19 MARIANA BADIAL, PHN SUPERVISOR

Testing for COVID-19 has been part of the T3 Test, Trace and Treat strategy implemented in San Diego County. Over the course of 18 months, the County of San Diego has performed over 1,288,369 COVID-19 tests. As of May 2020, medical personnel have spent a total of 89,574.87 hours testing the community. A total of 44 different testing sites were strategically spread over the 6 regions of San Diego County to serve the community.

The multidisciplinary team with nurses have worked arduously to operationalize the logistics of each site, from ordering supplies to collecting and processing samples. Thus, helping County of San Diego residents stay healthy and stop the spread of this infectious virus. Teamwork makes the dreamwork, this would not be possible without our Count of San Diego Nurses.





CoSD COVID-19Testing Site

AGING & INDEPENDENCE SERVICES (AIS): NURSE LEADERSHIP LAURA CARTER, PHN MANAGER

AIS Nursing has made some significant changes over the past 20 months! For the first time, the department has created a nursing model that comprises nurse leadership to develop, advance, and support the work of the nurse team. Starting with the hire of a new PHN Manager in January 2020, and later a PHN Supervisor; the reporting structure has been redesigned, resulting in increased collaboration amongst AIS programs and the nurse team, the development of AIS Nurse Standards of Care, and alignment with the HHSA Nursing Professional Practice Model. Within this model of nurse leadership, AIS nurses are demonstrating how impressively agile they are in adapting to new processes. The leadership onboarding happened when the pandemic commenced, causing a flurry of challenges and expectations beyond our wildest imagination. AIS services have been needed more than ever throughout the pandemic, and nurses have been called upon to provide expertise, education, and consult that support continued client care. Despite it all, the team's flexibility and forward-thinking have been extraordinary, resulting in a commitment to the highest quality care, enhanced practice excellence, and willingness to grow. The inclusion of the team's input has also rendered a new collaborative spirit and greater connection with nursing across the County.





AIS STAFF

PHPR STAFF AT EOC

Public Health Preparedness Response (PHPR) Branch Mindy Stewart, PHN Supervisor

The Public Health Preparedness and Response Branch functions under federal acts and Presidential Directives. For example, Presidential Policy Directive 8- National Preparedness works with strengthening the security and resilience of the United States and systematic preparation for the threats that pose the greatest risk to the security of the nation.

The Federal Emergency Management Agency (FEMA) guides the nation under the National Response Framework (NRF) in how to respond to all types of disasters and emergencies. During a national response, there are capabilities and resources that are the most frequently needed in a national response. The two that the Epidemiology/Bioterrorism (Epi/BT) Public Health Nurses plan for and respond to are Mass Care, Emergency Assistance, Temporary Housing, & Human Services and Public Health and Medical Services.

The work done by Epi/BT PHNs is guided by federal grants overseen by the CDC. These grants include Public Health Emergency Preparedness, Cities Readiness, and Pandemic Influenza. All these grants drive the work to protect County employees, critical infrastructure, and San Diego County residents. Examples of their work include Mass Care & Shelter training, the PHN Go-Bags, fit testing, and coordinating PODs for various diseases such as mumps, meningococcal, and influenza.