

# Evolving Clinical Experiences of NYUCN Students at the NYCDOHMH

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# Community Health Nursing Course at NYU

- Final semester course taken concurrently with Leadership and Management course
- Offered in both Fall and Spring semesters
- 14 week long experience at one clinical agency
- Placements in home care, clinics, community based organizations, school-based health centers and at NYCDOHMH

# NYCDOHMH clinical opportunities

- One of the largest DOH in the country
- Various arms provide differing services to the 5 counties of New York City
- Agencies for NYUCN Community Health Course
  - Health and Hospitals Corporation (HHC) Diagnostic and Treatment Centers
  - Health and Hospitals Corporation (HHC) Home and Health Care (H&HC)
  - Office of School Health
  - Worksite Wellness Initiative

# Worksite Wellness Initiative

- 3 year intervention study funded by CDC, partnering Cornell University and NYCDOHMH
- Started in 2005 with the plan to provide targeted health related info to employees and encourage environmental changes to the workplace at various sites throughout NYC

# Worksite Wellness Initiative (cont.)

Would there be a difference in the high and moderate intensity groups on the following indicators?

- Knowledge of health parameters (BMI, Cholesterol, BP, etc)
- Absenteeism
- Presenteeism

# Worksite Wellness Initiative (cont.)

- Operationalization
  - Health risk assessment forms completed at start of study and at year 1 and year 2 (implemented by DOH staff)
  - Health classes on various topics (Hypertension, Diabetes, Weight Loss, Smoking Cessation) (implemented by nursing students)

# Worksite Wellness Initiative (cont.)

- Operationalization (cont.)
  - One-on-One counseling (via telephone or face-to-face) to set behavioral change goals and follow-up (implemented by nursing students and health educators)
  - Wellness Challenges – targeted activities twice per year to motivate staff to make behavioral changes (implemented by nursing students and health educators) e.g. 10,000 steps – distributed pedometers to measure and record steps. Sites with highest participation received a luncheon.

# Worksite Wellness Initiative (cont.)

- Operationalization (cont.)
  - Environmental Changes to work site (implemented by DOH staff and management) e.g.: “Take the Stairs” signs, changes in available products at cafeteria (no transfats; fresh fruit; water/no calorie beverages etc)

# Evolving Role of the nursing student at Wellness at Work

- Assigned to “high intensity” sites only
- Taught health classes and did one-on-one counseling after extensive training by DOH staff and assisted with implementation of Wellness Challenges at assigned site only
- Became more involved in telehealth efforts to all “high intensity” site employees
- After one semester hiatus, assisted with final reports and meetings of study initiative

# Office of School Health

- Provides nursing staff to schools at NYC public and parochial schools.
- Dependent upon student need and school size, one RN may be assigned to a school
- Role includes triage of students health issues (injuries, asthma, diabetes, etc), upkeep of student health records (medications, immunizations), and vision and hearing screening, health teaching

# Evolving role of the nursing student at Office of School Health

- Assigned to various schools throughout NYC (at times 2:1 or 1:1), where the nurse has a BS and a desire to have a nursing student
- Assisted nurse in daily activities and taught health education class (topics varied)
- At assigned schools took on Open Airways program implementation which included multi-day training with American Lung Association staff

# Issues

- Time Conflict
  - course start date set by College
  - specific hours required
  - set clinical days
  - Conflicting College and school/city holidays
  - Difficulty completing programs before end of semester

# Issues (cont.)

- DOH training and clearance
  - Some content repetitive for students
  - Scheduling staff for training on clinical days
  - Finding space at DOH offices/ NYU campus
  - Fingerprinting for schools

# Issues (cont.)

- Site/Preceptor and student match
  - Variations in reception and eagerness to incorporate student into work/school environment
  - Variation in perception of role of student and role of preceptor
  - Result: too much work or too much downtime, inability of student to complete course assignments and poor matches of student/site/preceptor

# Issues (cont.)

- Student misconception of clinical experience
  - Focused on doing (assessments, care and teaching)
  - Not sure how other activities fit in with community health nursing

# Solutions

- Keeping an *open mind* (all)– As the needs of the agencies changed we brainstormed ways that we could keep students engaged and still be of service to the agency.
  - increasing telehealth component
  - assisting with final reports of study and presentations of the data
  - assuming responsibility for a necessary program (OAS in the schools).

# Solutions (cont.)

- Early Planning (Course Instructor and Precepting Agency)
  - Scheduling trainings to take place early in the semester and streamline content to keep students focused and energized
  - Providing suggested activities for downtime and/or “days off”

# Solutions (cont.)

- Inservices of staff regarding role of students and preceptors
- Reinforcement of other activities that are part of community health nursing for the preceptors and students

# Outcome

- Since Fall 2005
  - Over 60 NYUCN students participated in the Worksite Wellness Initiative program/study
  - Over 120 NYUCN students worked with the NYC School health nurses with nearly 60 implementing the Open Airways Program
  - These have been very popular clinicals (despite the bumps in the road), filling early in our registration process each semester

Thank you.  
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