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## ABSTRACT

In 1995, Southwestern College, in California, participated in a project to develop a home health course for registered nurses and students interested in working in home health settings. The course was intended to provide nurses and students with the knowledge and clinical skills required for home health care, improve collaboration among community college educators and home health agencies, and increase awareness in the community of the movement away from hospitalization toward home health care. Five community colleges, including Southwestern, and five home health agencies in San Diego formed the project's advisory committee, developing a detailed 3-unit summer elective course that included 27 didactic hours, 81 clinical hours, and a 4-hour preceptorship program for the clinical component. One challenge involved in the project was ensuring that student costs were reasonable, since other home health programs in the area had failed due to low turnout and a \$300 fee. A low cost of \$39, plus college credit and a certificate of completion, was achieved by arranging for donated course materials and volunteer preceptors from health care agencies. The project was successful in providing a model for agency collaboration and generating interest in home health care. A project budget is included. (TGI)

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# Final Report on Project

## "Curriculum Development for Home Health Nursing"

January 1995-1996

Submitted by  
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Final Report on AACC/Metropolitan Life Foundation Grant, Project Title: Curriculum Development for Home Health Nursing, Project Director: Mary Nagel, R.N., M.S.N.

Purpose and Expected Outcomes:

Historically, nurses and students have not been provided with experience and skills to prepare them to be qualified, competent home health nurses.

The purpose of this project was to develop curriculum content for Registered Nurses and new graduates and students interested in working in the home health setting.

The development of a home health course would provide nurses and students with the knowledge and clinical skills required to develop expertise in home health. Thus, nurses and students would be better equipped to compete for jobs in the home health setting. Faculty could also attend the home health course to update their knowledge and skills and to become competent educators in home health nursing and to be more competitive in the workforce.

Another need identified was to develop collaborative relationships among community college A.D.N. educators and home health agencies. A.D.N. programs and home health agencies would work together toward a common goal—to assist nurses and students in making the transition from acute care to home health. The overall goal was to help decrease the gap between academia and practice while creating opportunities for future projects.

Another purpose of the project was to increase awareness in the community of the movement away from hospitalization toward home health care by those directly and indirectly involved in the process. This project would also strengthen future communication by all those involved.

Collaboration among nursing organizations would enhance visibility of A.D.N. programs and demonstrate a commitment to preparing nurses for their changing roles.

Financially, the development of this course would benefit both community college A.D.N. programs and home health agencies. Home health agencies have found it financially taxing to orient and precept new nurses wanting to work in home health. Sometimes nurses find out that after orienting to home health that it is not for them. This wastes the agencies' money and time. The development of this course would partially take the place of the agencies' orientation program, thus saving them monies and time.

Community colleges would offer this course on a rotational basis each year to maximize resources and enhance nurse and student participation. Thus, the costs of the course are minimized and it can be offered every year and there would be sufficient enrollment for a full class each time the course is offered.

This home health course would also be shared with other California community colleges, so that they, too, may benefit.

This project has implications for curriculum changes. It is hoped that gradually the home health course content would be integrated into the A.D.N. basic curricula.

### Progress and Accomplishments

In February, 1995, an Advisory Committee was recruited which included one representative from four A.D.N. programs in the San Diego County. These included Southwestern College, Grossmont College, San Diego City College, and Palomar College. Also, in November, Imperial Beach College requested to join the group. They were initially excluded due to administrative support. On completion of this project there were five A.D.N. programs committed to rotating the course.

Initially, the goal was to include at least three home health agencies in San Diego. A total of five agencies--Scripps, Sharp, Mercy, UCSD, and Helping Hands--expressed an interest in participating and remained with the project until the end. All agencies have enthusiastically agreed to provide preceptors for the course at their expense.

In March, 1995, a survey form was sent to all local hospitals, colleges, universities, and home health agencies to obtain information about their existing educational and orientation programs related to home health care. I also included a list of topics related to home care which they felt were important for home care nurses and asked them to prioritize the topics. This information was compiled and shared with committee members in April, 1995, for consideration in writing the curriculum. Forty out of fifty surveys were returned. The survey also resulted in an increased awareness in the community of the goals of the project.

The committee developed a detailed home health curriculum for a three-unit summer elective, which includes 27 didactic hours and 81 clinical hours.

A four-hour preceptorship program was developed for the clinical component of the home health elective.

The content outline was shared with members of the Organization of Nurse Executives (ONE) and the State A.D.N. Director's Committee in August, 1995, for recommendations for implementation. It was received with positive feedback. Content was also shared with the California Board of Registered Nursing for CEU qualifications.

The course outline, included in the brochure advertising the course details, will be sent to all California A.D.N. programs, and California Association of Health Services at Home (CAHSAH) this week when the brochure is completed. An evaluation form will be included for follow-up as to how the course was implemented by other A.D.N. programs.

The planning committee met twice monthly from February through mid-June, 1995, to design the summer elective home health course, including objectives, content, clinical laboratory requirements, preceptorship program, prerequisite skills and competencies. Content was revised and finalized in November, 1995. The curriculum was designed to meet the academic and accreditation standards of the participating colleges and home health agencies.

In December, 1995, the course was approved by Southwestern College curriculum committee where it will be pilot tested initially, then rotated among the other colleges each year thereafter. The course will be offered over six weeks beginning the first week in June through mid-July. The course will be held on Mondays, Wednesdays, and Fridays. Refer to the brochure for details, which will be mailed to you this week.

These days and times were chosen by the committee since these were the busiest times for making home health visits. Didactic content will be presented along with clinical rotations in the same week for immediate application of the theoretical content in the clinical rotations. The hours were determined so the working RN would still be available on afternoons to work as well as additional days.

The home health course will be piloted at Southwestern College in the summer of 1996 and rotated every year among all five colleges.

### Special Challenges

During October, 1995, two similar home health courses were offered for continuing education for nurses transitioning into home care. These courses were 2 to 6 days long, offered on a one-time basis. One was sponsored by a local university and the other by an independent practitioner. I heard their turnout was very poor. In January, 1996, the independent practitioner called me saying she had heard I was developing a home health course. She wanted to know if I wanted to purchase the CAHSAH program for \$900, which she purchased at \$1500 for her course. She had only five participants out of 3500 mailings. The cost of her program was \$300. I told her I made an agreement with CAHSAH to receive their program free of charge. We discussed that the poor turnout might have been due to the costs of the program.

I feel our program will not only be very affordable at \$39, but we are also offering 54 CEUs, college credit and a certificate of completion. This individual also said she had to pay \$150 to each home health agency for a

preceptor. All the major home health agencies have offered us 2-3 preceptors each at no cost and I received phone calls from two other agencies who heard of our program and want to provide preceptors as well. It was almost like they did not want to be left out.

Another challenge was the dropout of Palomar College after our first meeting and minimal participation by Grossmont College. Palomar College dropped out due to time constraints and administrative support. In November, 1995, toward the end of the project, Palomar College rejoined us and expressed an interest in presenting the elective course in 1997. A few weeks ago, I learned that Palomar College is undergoing major changes and they may be deleting their A.D.N. program. So we'll have to wait and see.

The faculty representative from Grossmont College attended the first meeting, but assisted in the project via telephone.

Three local B.S.N. programs were also invited to be participants and/or consultants. They expressed an interest but did not attend the meetings.

I purchased Azuza University's (Los Angeles) curriculum content, which they had just developed. However, this information was too detailed and was a one year home health program for B.S.N./M.S.N. nursing students.

### Special Successes

I contacted the Education Coordinator at CAHSAH for input and feedback regarding the curriculum content we developed. They were also in the process of developing a home health course for RNs and were willing to share in exchange for our clinical content. I made this agreement in September, 1995. In January, 1996, we still had not received their content even though I was told they were sending it on three different occasions. Finally, last week, I received the entire package with transparencies, handouts, outlines, and three computer disks. It is interesting to note that they are marketing this entire course for \$1500 to members and \$2000 to nonmembers. I feel we benefited greatly by this exchange.

I also found out that Golden West College was developing a similar course based on a local grant. We have shared information and ideas throughout the last year. They were extremely helpful and supportive throughout the process.

As a result of this project, discussion has ensued among the A.D.N. colleges as to how to incorporate home health content and clinical into their curricula. Participating home health agencies have already voiced an interest in hiring RNs who have completed the course.

### Spinoff Results

One home health agency, UCSD, wants to send some of their hospital employees to the course and have requested to precept them, then hire them immediately into home health nursing positions at their own agency.

An interest has also been expressed in hiring new A.D.N. RN graduates after they have completed the course, provided there are openings.

I received a call last week from the Associate Dean of Point Loma of Nazarene B.S.N. School, asking if she could send some of her graduates to the course. This is a big step in collaboration among A.D.N. and B.S.N. schools.

I have also received calls from two other home health agencies offering to provide us with preceptors.

I have received letters from three other California community colleges and from Iowa Lakes Community College requesting our curriculum.

As a result of our survey, I have received several requests from individuals interested in teaching portions of the course.

### Conclusion and Implications for Colleges

This project proved to be very successful in providing a model of collaboration among college nursing programs and home health agencies in San Diego. Nursing organization collaborating in the project demonstrated an interest in assisting nurses to be better prepared for their changing roles into home health. This project helped to strengthen communications among A.D.N. colleges, home health agencies and nursing organizations while promoting a collaborative working relationship for a common goal. There is no doubt that the process has helped decrease the gap between academia and practice while paving the way for new opportunities for future projects. The process has already sparked an interest among local nurses who have heard of the course and are calling to find out when it will be offered.

The Project Director presented a poster on the project at a conference in Los Angeles for educators and clinicians on November 2, 1995. The Director will also be presenting poster sessions at University of San Diego on February 21, 1996, to Sigma Theta Tau members, a national nursing honor society; at the Ambulatory Care Conference April 18/19, 1996, in San Diego; and in Las Vegas, at the Home Health Conference on March 5, 6, 7, 1996. The Director also plans to write articles on the process and project itself in education journals and home health journals.

Overall, the implementation of the project has been an extremely positive and rewarding experience. It has generated a common interest and goal toward assisting RNs transitioning into home health.

### Budget

The budget was readjusted midway when I realized we needed more monies for supplies and postage and less for secretarial support. Number 5 of the budget, under professional services included changes of home health agency participation hours from 40 to 81 hours per agency. Preceptor class hours were changed from 20 to 4 hours since most agencies had already conducted basic preceptorship training. We will also be using a preceptor for each student, which will be more than five preceptors. We anticipate 15-20 preceptors, depending on the number of RNs participating in the course.

## Budget Report

The following is a breakdown of expenditures.

Project Director	\$6,919.00
College Faculty	600.00
Secretarial Support	300.00
Project Supplies	1,181.00
Other (Duplication, Telephone, Postage)	1,000.00
<b>TOTAL</b>	<b>\$10,000.00</b>

### Professional Services

Home Health Agency (81 hrs/agency x 15 agencies x \$40/hr.)	College Match \$48,600.00
Preceptors (8 hrs training x 15 preceptors x \$40/hr.)	College Match \$4,800.00
	<b>\$53,400.00</b>

Financing the course, while offering CEUs and college credit proved to be a challenge. The cost of paying faculty to teach the three-credit course needed a minimum of 25 students to break even. However, if only ten students signed up, we were committed to offering the course. Through the overwhelming support of the Dean of Nursing at Southwestern College, Charlotte Erdahl, and the Vice-President Academic Affairs, Tom Hahn, we were offered financial support to offer the course no matter how many students participated.

We were able to purchase videotapes on home health nursing to be used in teaching the course. We purchased about five books recently published on home health nursing, one of which the student's will purchase for the class. I subscribed to a home health newsletter and the home healthcare consultant with up-to-date articles and conferences related to home care. I developed a brochure and printed 2,000 copies for advertising the course.



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