

**COLLABORATION FOR
ADVANCEMENT IN PUBLIC HEALTH NURSING EDUCATION
IN ILLINOIS**

Response to Call for Abstracts:

COUNCIL ON LINKAGES BETWEEN ACADEMIA AND PUBLIC HEALTH PRACTICE

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Concerns among public health nurse (PHN) administrators practicing in three central Illinois local health departments, Peoria City/County, Tazewell County, and Fulton County Health Departments expressed to University of Illinois Chicago (UIC) College of Nursing faculty resulted in the partnership of approximately 78 agencies and institutions to address: 1) the paradigm shift of public health nursing and the revisions and enhancements required for formal and continuing education, 2) the recruitment and retention of nurses in public health, and 3) the lack of diversity among PHNs.

With funding from the Health Resources and Services Administration, the UIC "Advancing Public Health Nursing Education (APHNE) in Illinois" project was created to focus on the concerns brought forth by the health department PHNs. The APHNE project is comprised of PHNs from academia and practice (university/college deans and faculty and state and local health department nursing administrators and staff) participating in a State Advisory Board (SAB) and/or one of five regional consortia components. The SAB and regional consortia are responsible for strategic planning and regional implementation of strategies addressing the identified issues. The outcomes from the collaborative were dynamic and included: 1) revision and enhancement of a state-of-the-art PHN graduate curricula that provides flexibility through distance learning for nurses working in public/community health settings, 2) increased enrollment within UIC's PHN graduate programs, 3) creation of a preceptor manual for use as a statewide model in guiding students, faculty, preceptors, and agency through the practicum experience, and 4) opportunities to enhance knowledge and skills. Further funding from Pfizer, Inc and the National Library of Medicine provided opportunities to work in the areas of health literacy and increasing accessibility to the evidence base of PHN respectively.

The APHNE project has accomplished much as related in the outcomes above; however, difficulties did arise as the state budget crisis trickled down and touched many of the agencies participating in this endeavor. For many, costs became prohibitive (i.e., monetary reimbursement for travel, and time away from the office), thereby reducing participant attendance. To offset some of the cost APHNE funding did allow for mileage compensation; however for many, the real issue was the lack of personnel to cover for the absence of another within the agency – another reflection of the nursing shortage within public health. In spite of obstacles APHNE participants persevered and were rewarded not only in the achievements above, but delighted in the opportunity to interact with colleagues and with national leadership, realizing their many common goals, and becoming better practicum mentors for students. However, the most significant outcome for both academia and practice has been a renewed pride in the PHN profession, as participants of all ages and experiences share not only their concerns, but their enthusiasms and commitment to excellence in public health nursing.

This collaborative has been mutually beneficial for the university, the public health agencies, and for the communities served. Academia has a greater awareness of obstacles experienced by those in practice. PHNs in practice realize that every effort must be made to keep abreast of the current evidence supporting practice and that professional education does not stop with completion of an academic program. With communication open and a strong commitment linking PHN academia and practice, an approachable pathway of professional dialogue is available for resolving current and future health problems of the community.