**PART II:**

The nursing process has key components essential to identify and find solutions for a variety of complex problems. A nurse aims to find evidence-based practice that has been validated and proven to be effective in an effort to reach solutions.

**Assessment:**

An important aspect of the nursing process is assessment, because it involves the collection of data. The collection of data includes methods such as questionnaires, windshield survey, and/or in-person or phone interview. The following assessment tools will be utilized to gather information pertaining to the people at high risk of spreading the virus in the United States.

* Collect subjective/objective data related to the virus
* Pre-screen travelers (African nations, entire Caribbean, Central and South American continents.
* Identify signs and symptoms pertinent to the virus
* Windshield survey of the community to identify those at higher risks of exposure, i.e. (pregnant women or those actively seeking to conceive)
* Ask questions about the use of condoms or IV drug users
* Outreach to sexually active heterosexual, homosexual, bi-sexual, transgender, and etc.
* Conduct a survey about condom use/recent unprotected sex
* Outreach to breastfeeding mothers
* Assess knowledge of the virus
* Identify those who underwent a blood-transfusion
* Take vital signs and record measurements accurately
* Ask about recent mosquito bites
* Assess knowledge of proper insect repellent/net usage
* Ask questions specific to the virus, such as rash, fever, myalgia, or headache
* Questions about generalized pain secondary to the rash

The assessment section is crucial in designing a concise and coherent health education program, because it entails the collection of data. The collection of data requires professionals from all facets of the health care/education, such as nurses, doctors, social workers, teachers, therapist, and psychiatrist. A plan to recruit these professionals would include distributing flyers, and making announcements in the public about the dangers of the virus. The volunteers would be required to sign a consent form, and a contract abiding to the rules and standards of the health education program. The volunteers must participate in the health education program at least 3x a month, including field work. The social workers will be responsible for conducting unannounced home visits to outreach those at higher risks. A questionnaire addressing all concerns and problems will be generated collaboratively as a group and use to collect data. The younger generation will have the opportunity to create a questionnaire in an effort to entice the youth to participate. The media will be utilized for the purpose of announcements in an effort to keep the population abreast of the situation.

**Diagnosis:**

The nursing diagnosis is specifically design for nurses to identify risks factors within a particular community. This section includes problems and concerns derived from the data collected under assessment.

* Risk of infection related exposure
* Knowledge deficit related to disease process and progression
* Pain related to myalgia and rash
* Ineffective coping mechanism
* Failure to thrive (newborn, toddler, young children )
* Nutritional deficiency
* Disturbed body image related to rash
* Risk of skin lesion
* Disruption of social interaction
* Poor family dynamics
* Social isolation
* Sexual dysfunction
* Failure in the performance of the role of caregiver
* Spiritual distress
* Inability to adapt to a change in health status
* Risk of activity intolerance
* Breast feeding interrupted

After the data has been collected and analyzed collaboratively as a group, the problems will be generated with a focus on the virus specifics. The problems provide a general overview of the population concerns and risks. It focuses on specific human characteristics such as mental, emotional, physical, and spiritual. A group of people from different communities will be selected and encouraged to create one major problem that affects their community. The involvement of the people increases awareness and promotes autonomy. It gives the people ownership of their health and wellness.

**Planning:**

The planning involves organizing the actions and ideas to find solutions to the problem list. It is a set of actions that the nurse will implement to resolve an issue or problem affecting the community. The nurse determines which diagnosis will receive the most attention based on the level of severity and potential to cause harm to the population.

* Open-question panel for the people
* Educational workshops related to the virus
* Workshops about safe-sex practices in schools (adolescents & college students)
* Create a screening tool as part of the triage process in emergency department and clinics
* Steps to prevent mosquitoes bites when travelling to high risk areas
* Teach about proper use of mosquito repellent
* Invite the Department of Health to discuss ways to contain the spread of the virus
* Workshops about alternative methods to breastfeeding
* Educational workshops about the consequences for women seeking to conceive
* Non-pharmacological pain management workshops
* Therapy to help affected clients to cope with the disease process-disturbed body image

A multidisciplinary meeting will be held in a park or in a local school to discuss and determine which problems are of most concern to the community. The meeting can also be held at a local community center, if the law permits it. A questionnaire based on the problem list will be distributed to every individual in the meeting. The questionnaire will include questions pertaining to the virus and prevention techniques. A rating scale system will be incorporated in the questionnaire for the people to decide the problem level of severity.

Teachers willing to volunteer can assess the clients’ level of literacy to ensure the quality of service rendered to the public. A great emphasis will be placed on increasing awareness and educating the public about the virus.

The community will be encouraged to write letters requesting donations from IKEA or Costco. These donations can include mosquito repellent and netting, Benadryl, and other supplies to give out to the public at no cost. The purpose of having the community write this letter is to give them the opportunity to advocate for themselves.

**Implementation:**

The implementation phase is based on an organized plan of action. The plan is specific to each problem and focuses on measurable/achievable outcomes. The Community Health Nurse monitors clients’ improvement and partakes in promoting wellness and health.

* Provide/give out free condoms to adolescents and college students 2x week
* Distribute flyers in every encounter with clients in the community (parks, streets)
* Train/teach young children how to use mosquito repellent 1x week in school
* Lecture on the use of condoms to adolescents and college students 1x week
* Teach people in different communities about the signs and symptoms of the virus 2x month
* Instruct travelers ways to protect themselves from mosquitoes bites 1x prior to traveling
* Conduct workshops 2x a month to pregnant/seeking to conceive not to travel to high risk areas
* Provide educational pamphlets about alternative feeding methods (formula) prior to leaving the hospital 1x in every shift or have a visiting nurse 1x week for follow up (if expose to the virus)
* Conduct workshops in schools, parks, and streets related to proper usage of mosquito repellent and netting-1x week

A group of volunteers will be assigned to a particular location, and it will be based on age group. Each volunteer will be required to document availability and report in advance if not able to commit to the assignment. It is required for the volunteer to report any cancellation 1 month prior to the task. The condoms distribution will take place in private settings, schools, clinics, and outdoors. The condoms will be distributed in a discreetly manner to avoid alarming the public. The condoms will be distributed 2x a week. The person distributing the condoms will be required to wear a shirt with a sign “Virus Prevention.” The flyers about prevention will be given out by every volunteer.

Teachers will conduct workshops 1x week in the school to teach the younger kids about the signs and symptoms related to the virus. A lecture on the use of mosquito repellent and netting will take place in a classroom setting right after school hours.

A volunteer will stand by the exit door at the airport to alert people about the virus, and flyers will be available at no cost. Another volunteer will inform people at the airport about ways to protect themselves from mosquitos’ bites. This volunteer will be selected randomly each week to avoid causing exhaustion.

A spokesperson from the Department of Health will be invited to discuss current evidence-based practice related to this particular virus. The spokesperson will provide interventions or current treatment to prevent the spread of the virus in the United States.

**Evaluation:**

The nurse determines whether the plan of action was successful based on the goal outcomes. The CHN determines whether the identified goals were met, and if client improvement was observed.

* A group of adolescents from different boroughs self-reported rates of safe sex practices by 43% in a year and 74% collected at least 2 condoms in every session
* Approximately 15,000 flyers were dispersed in a year.
* 80% of young children provided a return demonstration on proper use and application of mosquito repellent after two weeks of lecture
* 100% of college students self-reported proper use of condoms and verbalized the significance of usage after 3 weeks of lecture
* 67% of people in every borough verbalized 3-4 signs/symptoms about the virus after participating in 2 workshops
* 45% of the population verbalized understanding of protecting themselves when traveling to high risks areas after 1 session (4 hours) lecture
* 100% of pregnant/seeking to conceive women agreed not to travel to high risks continents after 2 sessions and acknowledged the consequences to the unborn/newborn
* 97% of breastfeeding mothers verbalized the dangers of breastfeeding if exposed to the virus after 1x session
* 100% of women with access to prenatal care will have mosquito netting/repellent

The evaluation section requires all participants to complete a narrative survey. The narrative survey will include concepts related to the goals. Each community is responsible to submit an independent written report explaining whether the goals were met as planned. Every participant will have access to computers at a local library to complete the narrative survey within 72 hours. The adolescent responsible to conduct the adolescent workshops needs to report whether the goals were met. A return demonstration at the end of each session will be required to assess the younger kids’ understanding of using a mosquito repellent and netting. The teachers will evaluate each student ability to maneuver the mosquito repellent and netting, and provide a number of kids showing proper return demonstration. If the goals were not achieve as expected, the program failed and needs to be re-establish and assessed appropriately. In conclusion, the evaluation is the process to observe and measure the effectiveness of the objectives.