

# POLICY AND PROCEDURE MANUAL FOR PUBLIC HEALTH NURSE TRAINING

2022

Office of Nursing

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### INTRODUCTION TO NURSE PROTOCOL AND TRAINING

The nurse protocol legislation (O. C. G. A. § 43-34-23) enacted in 1989, authorizes Registered Professional Nurses (RNs) and Advanced Practice Registered Nurses (APRNs) who are agents or employees of a county board of health or the Georgia Department of Public Health (DPH), and who are adequately prepared, to perform certain delegated medical acts under the authority of nurse protocol. Since the passage of this important legislation, DPH has provided direction and guidance for public health nursing practice and training under nurse protocol.

The Standard Nurse Protocols for Registered Professional Nurses in Public Health were developed to serve populations in women's health, children's health, as well as populations affected by sexually transmitted disease, HIV/AIDS, tuberculosis, hypertension, diabetes, and other infectious diseases. RNs and APRNs who are agents or employees of a County Board of Health or the Georgia DPH are among those authorized to practice under nurse protocol (O.C.G.A. § 43-34-23). Under this authority, a physician may delegate the performance of certain medical acts to RNs and APRNs to order and dispense dangerous drugs, order medical treatments and/or diagnostic studies for more than 100 health conditions outlined in the nurse protocol manual. The delegated medical acts must be performed by the RN or APRN in accordance with a current nurse protocol, which has been signed by the RN or APRN and the delegating physician, and in accordance with a drug dispensing procedure. The RN or APRN practicing under a nurse protocol agreement must comply with all rules and regulations established by the Georgia Board of Nursing and the Georgia Pharmacy Board. Additionally, to function under nurse protocol, nurses must complete specialized training, which includes core competencies and programmatic training requirements, to ensure nurses are adequately trained and competent to provide quality care consistent with nurse protocols.

### PURPOSE OF POLICY AND PROCEDURE MANUAL FOR PUBLIC HEALTH NURSE TRAINING

The Office of Nursing (OON) publishes The Policy and Procedure Manual for Public Health Nurse Training, in collaboration with DPH programs, as a companion to the Standard Nurse Protocols to detail the required self-study, didactic, and preceptorship clinical training components that a nurse must complete prior to providing care within specific public health programs and functioning under a nurse protocol. Additionally, annual training requirements are provided within the manual to ensure that each nurse remains up to date on evidence-based practices and develops proficiency in the delivery of quality care consistent with the standards of the nurse protocol agreement.

The Policy and Procedure Manual for Public Health Nurse Training includes both the general orientation given to all new PHNs (i.e., core competency) as well as focused clinical orientation and training necessary to function under specific nursing protocols (i.e., STD, Women's Health, etc.). The "initial required" and "annual required" training practice standards are used to document the training completed by a PHN as part of the necessary preparation, and ongoing education, for practicing under nurse protocol.

The OON has the responsibility to coordinate training and practice standards in accordance with the most current research and evidence-based practice identified by subject matter experts in each program. The OON will review and update the Policy and Procedure Manual for Public Health Nurse Training at least annually to ensure consistency with best practices and standards of care within nurse protocols.

### DOCUMENTATION OF TRAINING AND PROFESSIONAL DEVELOPMENT

Prior to the PHN functioning under a nurse protocol, there should be written documentation that the nurse has received the training, preparation and/or orientation relative to each medical act authorized by the specific nurse protocol and can competently perform such acts. Documentation may include certificates of completion, supervisory notes, orientation plans, direct observation of clinical performance, skills checklist(s) and/or performance appraisal(s). It is the responsibility of each individual RN and APRN to complete and remain up to date on all required trainings included in this manual, maintain documentation of trainings, and provide certificates of completion to their supervisor. Documentation of training completion required to practice under any nurse protocols should be maintained by the individual nurse and on file at either the district office or by the County Nurse Manager or supervisor.

NOTE: APRNs working under a standard nurse protocol for RNs need to follow the training requirements as outlined in this Manual. Their training should be individualized as much as possible according to their scope of practice, background, and experience as assessed at the district level. For an APRN practicing with prescriptive authority through the Composite Medical Board, guidance specific to their practice and supervision is available in the appendix of the Standard Nurse Protocols for Registered Professional Nurses in Public Health.

### Policy and Procedure Manual for Public Health Nurse Training

### Core Competency Standards and Training

### **CORE COMPETENCIES FOR PUBLIC HEALTH NURSES**

Core competencies outlined in the table below are required for all RNs and APRNs. The core competency requirements ensure that PHNs are prepared and competent to provide quality care under the authority of nurse protocol statute and include standard expectations for public health nursing practice, health equity, 340B, and emergency preparedness.

RNs and APRNs not practicing under the nurse protocol statute may omit core competencies 1-4.

NOTE: In an emergency or disaster response, it may be required for the RN or APRN to complete just in time training for additional or new nurse protocols and drug dispensing procedures.

### PROFESSIONAL LICENSURE

Each RN and APRN must be currently licensed/authorized by the Georgia Board of Nursing. Documentation shall include verification of an active license(s) through the <u>GA Board of Nursing</u>.

#### **FORMAT**

NOTE: Underlined content throughout the document are hyperlinks to the electronic version. Bold font represents recent revisions in the manual.

### **CORE COMPETENCIES FOR PUBLIC HEALTH NURSES**

Core Competencies	Comments	Course Duration	Date Completed and Initials
NOTE: Complete initially unless indicated			and initials
1. Review Nurse Protocol Statute (O.C.G.A. § 43-34-23). Georgia Composite Medical Board O.C.G.A. Article 2. Medical Practice. Delegation of authority to registered nurses. (O.C.G.A. § 43-34-23 begins on page 20)	Objective: understand the foundation of PHN practice in Georgia.	30 mins	
<ul> <li>Review the following sections in the Standard Nurse Protocols for Registered Professional Nurses in Public Health-2022:         <ul> <li>Guidelines and Requirements for Nurse Protocols</li> <li>Orientation, Training, and Quality Assurance for Nurse Protocols</li> <li>Drug Dispensing Procedure</li> </ul> </li> </ul>	Objective: understand the foundation of PHN practice in Georgia.	1 hour	
Complete Nurse Protocol 101:     Orientation to Nurse Protocol.	Description: <b>a</b> brief training that provides an overview of information related to Nurse Protocol Statute and <b>PHN's</b> roles and responsibilities.	45 mins	
<ol> <li>Read DPH Confidentiality of Personal         Health Information and Compliance with         HIPAA Policy.</li> <li>Complete DPH HIPAA Training.</li> </ol>	Description: Course covers the fundamentals of privacy and security that are mandated in the federal Health Insurance Portability and Accountability Act (HIPAA).  Documentation of annual district HIPAA	90 mins	
Complete initially and annually.	training can take the place of annual DPH course completion.		

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5. Review Dispensing of Medications under Authority of a Nurse Protocol. Rules and Regulations of the State of Georgia website. Rules of Georgia State Board of Pharmacy. Chapter 480-30.	Description: Georgia rules and regulations as it relates to the dispensing of medications: definitions, general requirements, labeling, packaging, storage, inspection of records, and submission of dispensing procedure for board review.	30 mins	
6. Review DPH Policy Bloodborne Pathogen Occupational Exposure Control and Response for Public Health Workers.  Read Attachment A: Workplace Safety Guidelines to Protect Public Health Employees and Patients from Exposure to Bloodborne Pathogens.  • Review OSHA BBP Standards.  • Complete the following courses:  • Basics of the OSHA Bloodborne Pathogen Standard for the Healthcare Setting  • Basic Infection Prevention in the Ambulatory Care Setting: Personal Protective Equipment and Safe Surfaces  Read Attachment B: Occupational Post- Exposure Prophylaxis (oPEP)  • Complete the National HIV Curriculum: Module 5, Lesson 3: Occupational Postexposure Prophylaxis and successfully pass	to reduce occupational risk of exposure to infectious disease and to protect patients and the community by preventing or limiting the transmission of infection.      describe GA DPH guidelines and recommendations for the dispensing of oPEP.	6 hours	

the question bank with a minimum score of 80%.		
Complete initially and annually.		
7. Complete CDC Laboratory Training: Packing and Shipping Dangerous Goods: What the Laboratory Staff Must Know.	Objective: to provide training on packing and shipping Division 6.2 infectious substances. It is intended for public health and clinical laboratory staff involved in any step of the packing or transport process of patient samples or cultures.	2 hours
8. Complete the Ready, Set, Test! Webinar.  Review the DPH CLIA Toolkit (2019) and personnel competency assessment form for non-waived tests.	Objective: all personnel performing laboratory testing are required to meet the Centers for Medicare & Medicaid Services (CMS) Rules and Regulations requirements of personnel competency. The CLIA toolkit offers guidance on the standards, requirements, and processes involved in being and staying in compliance with	1 hour
You may also access the CLIA Toolkit and personnel competency assessment form within the Teams CLIA Workgroup HERE.	CMS & CLIA Rules and Regulations. Certification and appropriate training for nursing personnel is determined at the district level based on compliance with and type of CLIA certification.	
9. Review the DPH Policy for Mandatory Reporting of Suspected Child Abuse.  Review the following 2020 Georgia	Description: public health employees are mandated reporters of suspected child abuse under the Georgia Child Abuse Reporting Law O.C.G.A. §19-7-5 and are required to report	4 hours
Codes:  O.C.G.A § 19-7-5 Reporting of Child Abuse O.C.G.A. § 16-6-3 Statutory Rape O.C.G.A. § 16-6-22 Incest O.C.G.A § 16-12-100 Sexual Exploitation of Children	suspected child abuse, which includes sexual abuse or sexual exploitation, according to the DPH Policy for Mandatory Reporting of Suspected Child Abuse.  Objectives:  Describe the mandated reporter's role in reporting suspected abuse and neglect.	

O.C.G.A § 31-7-9 Nonaccidental Injuries to Patients     O.C.G.A. § Disabled Adults and Elder Persons: Reporting of Need for Protective Services  Complete the webinar: Mandated Reporters: Critical Links in Protecting Children in Georgia.  Complete initially and annually.	<ul> <li>Identify physical and behavioral indicators of the legally recognized types of abuse and neglect in Georgia.</li> <li>Identify which groups of children may be at higher risk of being abused or neglected.</li> <li>Describe the steps necessary to report suspected abuse or neglect.</li> </ul>		
<ul><li>10. Complete <u>Human Trafficking</u>     Awareness Training.</li><li>Complete initially and annually.</li></ul>	Objectives: provides an overview of human trafficking and sex trafficking, along with key indicators.	30 mins	
11. Complete Health Equity training:  Making Your Health Department More Culturally Competent.	Objective: gain knowledge, strategies, and techniques to sensitively, efficiently, and professionally communicate with persons from diverse cultural, socioeconomic, educational, racial, ethnic and professional backgrounds, and persons of all ages and lifestyle preferences.	90 mins	
12. Complete Cultural Competency Training in the Care of LGBTQ Patients- LGBTQ Essentials: Foundations of Care.  Review Providing Inclusive Services and Care for LGBT People: A Guide for Health Care Staff.	<ul> <li>Objectives:         <ul> <li>Define foundational terminology</li> <li>Acknowledge health disparities of LGBTQ people</li> </ul> </li> <li>Apply frameworks of care for working with LGBTQ people</li> <li>Methods to incorporate best practices</li> </ul>	90 mins	
13. Complete the following 340B <u>University OnDemand</u> trainings:	Executive Leadership Team (ELT) should additionally complete:		

- Introduction to the 340B Drug Pricing Program
- <u>Eligibility Overview- Grantee (RW</u> HIV, STD, and TB)
- Compliance Cornerstones

Review the 340B Patient Definition.

Complete initially and annually

- 340B for the C-Suite
- Managing Physical Clinic Inventory
- 340B Stakeholder Perspectives
- 340B Pricing
- 340B and Medicaid
- HRSA's Medicaid Exclusion File
- Audit Process and Preparedness
- Review <u>340B Tools for Grantees (STD,</u> RY, TB).
  - Grantee- Getting Started in 340B Checklist
  - Medicaid Exclusion File Checklist
  - 340B Oversight Best Practices Dashboard
  - Grantees- Title X Family Planning Sample Policy and Procedure Manual
  - Self-Audit: Policy and Procedure
  - HRSA Audits of Entities

If a contract pharmacy arrangement is utilized, the ELT should also complete the following:

- 340B Drug Delivery Models
- Contract Pharmacy
- Entity-Owned Pharmacy
- Review <u>340B Tools for Grantees (STD,</u> RY, TB)
  - Contract Pharmacy Medicaid Carve-In Checklist
  - Self-Audit: Contract Pharmacy

Nurses: 1 hour and 10 mins

ELT: 5 hours

<ul><li>14. Basic Life Support (BLS) for the healthcare professional.</li><li>Must maintain certification.</li></ul>	Description: A BLS course trains participants to promptly recognize several life-threatening emergencies, give high-quality chest compressions, deliver appropriate ventilations and provide early use of an AED.	4 hours	
15. Emergency Response Polices, Procedures, and Protocols. Read Standard Nurse Protocol for Allergic Reaction and Acute Anaphylaxis Protocol and Appendixes, along with the following appendix guidelines:  Procedure for Emergency Kits/Carts Emergency Cart Checklist Procedure for Reviewing Emergency Protocols and Procedures Emergency Checklist for Clinics Evaluation Tool for Practice Drill Review with your supervisor: role in an emergency, location of emergency supplies (e.g., emergency kit, oxygen tank, AED, ambu bag, gloves, sharps, etc.), use of phone system, map of facility with emergency exits, and monthly emergency cart checklist.  Participate in an emergency drill initially and annually to include an infant, child, and adult.	Objectives:  a. the nurse will verbalize his or her role in emergency drills and in emergency situations  b. the nurse will locate emergency exits, emergency kit/cart, oxygen tank, AED, and supplies that may be used in an emergency  c. the nurse will demonstrate correct usage of phone system  d. the nurse will demonstrate correct use of the allergic reaction/anaphylaxis record form  e. the nurse will verbalize side effects, mechanism of action, administration techniques, and contraindications to epinephrine and diphenhydramine  f. the nurse will identify symptoms indicative of an opioid overdose and steps to take in the event of an emergency.		

Read Standard Nurse Protocol for Suspected Opioid Overdose and review Attachment A: Opioid Overdose Record. Complete Responding to Suspected Opioid Overdose training. Password: phvideo  16. View the Applied Phlebotomy Video: Basic Venipuncture	Objectives:  • Demonstrate the performance of a basic venipuncture procedure.  • Collect samples without risking injury.  • Minimize collector-induced errors that	43 mins
17. Complete Online TB Update and Skin Test Certification Course (complete skills validation under supervision after online course requirements are fulfilled)  OR  TB Update & Tuberculin Skin Test (TST) Certification Workshop provided by State TB Office/District TB Coordinator/Certified Instructor. Contact District TB Coordinator or State Office Nurse. Access training schedule and registration forms.	<ul> <li>alter results.</li> <li>Objectives: <ul> <li>Identify 3 factors that can influence TB transmission.</li> <li>Explain the difference between LTBI and active TB disease</li> <li>Recognize and list the symptoms of pulmonary TB</li> <li>List 5 steps for TB screening</li> <li>Demonstrate the proper method of TST administration, measurement of induration and interpretation of results.</li> </ul> </li> </ul>	6 hours
<ul> <li>18. Complete the Georgia HIV Counseling,         Testing, and Linkage Course. Register         for the course here.</li> <li>To complete course registration, you will         need your INSTI certificate number. You         may complete courses to obtain an INSTI         number here.</li> </ul>	Description: the HIV Counseling, Testing, and Linkage Course is a blended style training that encompasses independent learning modules from the Georgia Public Health Academy-Disease & Health Knowledge Base and DPH Office of HIV AIDS.	30 mins (self- study modules)  2-day (virtual): 5-hour

After completing the registration form, you will receive a confirmation email within 10-14 days before your HIV Counseling, Testing, and Linkage Course date. The email will contain:  1. Prerequisite self-study modules and assessments to complete prior to the course.  2. The virtual link to the course or physical address of training location.	classes each day	
Objective: an introduction to basic HIV concepts and to prepare staff to conduct HIV counseling, testing, and linkage in an effective and culturally sensitive manner both in clinical settings and in communities.		

### **EMERGENCY PREPAREDNESS**

**PHNs** play an essential role in emergency preparedness, planning and response. It is important that PHNs understand their role and how **it** fits into Emergency Preparedness within their district. Each district has an emergency preparedness training team, who in conjunction with district nursing leadership, may customize how and when these trainings are offered for PHNs. The checklist below is **a** guide to ensure emergency preparedness competency for every PHN.

Core Competency Expectation	Comments/Notes	Course Duration	Date Completed and Initials
EP 101: Work with District Nursing Leadership and Emergency Coordinator to learn PHN roles and responsibilities during an emergency relevant to: Mass Care Emergency Support Function 6 and 8, Non-Pharmaceutical Countermeasures (e.g., Isolation and Quarantine), and Continuity of Operations.  Have an up-to-date Family Readiness Plan. Visit Ready.gov to create your plan.	<ol> <li>Gather supplies/equipment consistent with the family readiness plan.</li> <li>Describe methods for enhancing personal resilience, including physical and mental health and well-being, as part of disaster preparation and planning.</li> </ol>	N/A	
EP 102: Describe PHN role in disaster preparedness and response in a general population shelter.  Complete the Mass Shelter Training.	<ol> <li>Describe the PHN role in disaster preparedness and response.</li> <li>Identify authoritative sources for obtaining and sharing information during a mass care event.</li> <li>Explain principles of crisis and emergency risk communication to meet the needs of shelter populations.</li> <li>Develop a plan for ensuring appropriate documentation and confidentially of care.</li> </ol>	3.5 hours	

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EP 103: Participate in emergency preparedness drills, exercises, or preparedness planning efforts when indicated by District Leadership.	Demonstrate the role of the PHN in an emergency or disaster response to include:  • Basic therapeutic interventions  • Basic first aid skills and procedures  • Safe dispensation of medications and/or administration of vaccines  • Appropriate use of personal protection and safety equipment.	Varies	
EP 105: Complete the Georgia National Incident Management System (NIMS) training requirements based on your Public Health position. See graph below.	<ol> <li>Understand the concepts and principles of NIMS.</li> <li>Describe the NIMS management characteristics that are the foundation of the ICS.</li> </ol>	Varies	

Georgia National Incident Management System (NIMS) Training Guidelines – ICS Trainings for PHNs: The Department of Homeland Security requires that all public safety agencies that request federal grant funds use the NIMS. Developed by communications and disaster experts, the system provides a systematic structure that enables communication and coordination among agencies that don't typically work together outside of an emergency. All PHNs should be familiar with the incident command structure and basic terminology used during disasters. Nurses who interface with the command center and are more likely to be decision-makers in disasters may require advanced application of ICS to perform their duties. The chart below reflects the position-specific training through FEMA Emergency Management Institute.

	The Cagnia Living Living Wallagorii on the Cagnia	-
		*§ IS-800. <b>D</b> : National Response Framework, an Introduction
		*† IS-700.B: <u>An Introduction to the National Incident Management System</u>
		† IS-200.C: <u>Basic Incident Command System</u> for Initial Response
	† IS-100.C: Introduction to the Incident Command System	† IS-100.C: Introduction to the Incident Command System
Baseline	All PHNs	Nursing Leadership

<sup>\*</sup> Complete in accordance with District Emergency Preparedness ICS NIMS requirements.

† If this training was completed in 2017 or earlier, the nurse will need to complete the required training once more as the content has been updated to reflect current recommendations. Training certificates dated 2018 to present are valid.

§ For IS-800.D, the nurse will need to complete training once more if certificate was issued in 2019 or earlier. Training certificates dated 2020 to present are valid.

## Policy and Procedure Manual for Public Health Nurse Training

### Program Standards and Training

### PROGRAM STANDARDS AND TRAINING FOR PUBLIC HEALTH NURSES

Program training requirements outlined in the table below are required for RNs and APRNs to practice under the specific program nurse protocols (e.g., Child Health, Sexually Transmitted Disease, Tuberculosis, Women's Health, etc..). Once the PHN completes the initial training requirements and preceptorship within a specific program (e.g., immunizations) and demonstrates the competency to provide safe and knowledgeable care, the nurse may begin to practice within that program. The training path, with a detailed priority and schedule for programmatic training, should be customized for the individual PHN to fit the unique needs at the local and district level and would be guided by the County Nurse Manager, District Nursing Director, and/or District Health Director. A sample Outline of Initial Program Standards and Training for PHNs is provided in this manual as Attachment A to demonstrate a priority approach to training completion. An Outline of Annual Standards and Training for Public Health Nurses is also provided in this manual as Attachment B.

NOTE: PHNs are not required to complete training and preceptorship for all programs in public health if there are specific programs that not indicated for that individual PHN per the local and district direction (e.g., Child Health, HIV, etc.).

Completion of a Health Assessment course is required for nurses to practice in an expanded role in public health. Before a nurse may work under nurse protocol, a PHN must provide written documentation, such as a transcript, to verify completion of a Health Assessment course at the baccalaureate or master's level. If a Health Assessment course was not part of the RN's baccalaureate or master's program, they must complete the Health Assessment course provided by the DPH Office of Nursing (OON) or a baccalaureate level Health Assessment course within one year from date of hire. To ensure competency after completion of the Health Assessment course provided by the OON or a baccalaureate program, nurses must complete a Health Assessment clinical preceptorship. Due to the timing of different programmatic training opportunities, nurses may begin initial programmatic clinical training course requirements or take the Health Assessment course concurrently with other training requirements (e.g., Women's Health Exam and Issues Affecting Women Through the Ages). Documentation of completion of the Health Assessment course must be on file for all nurses.

### **GUIDANCE FOR PRECEPTORSHIP**

The purpose of a supervised preceptorship is to observe and validate clinical competency prior to independently practicing under nurse protocol. A preceptor should be a top performer (RN or APRN) with proven proficiency of skills and able to discern competency of the nurse who is in training. If at any time any nurse should need a review of performance competency, the observation of performance should be performed by a qualified preceptor.

NOTE: It is understood that nurses are hired with a variety of education and practice experiences. Therefore, the duration of a preceptorship may vary based on the nurse's

determined level of competency. However, there shall be documentation that the nurse satisfactorily meets all program requirements and performs the required clinical skills prior to signing the nurse protocol(s) agreement and practicing under nurse protocol(s).

#### **GUIDANCE FOR PEER REVIEW**

Peer review is a process to assess and evaluate a clinician's work with a patient or group of patients by a clinician in the same field who has similar training, experience, and expertise. An APRN, when available, or an experienced RN practicing under nurse protocol who has completed a baccalaureate or master's level Health Assessment course should observe a RN performing in the field for review. If the nurse is an APRN, the review should be provided by another APRN or a physician. If the pool of practitioners is too small within the district, external peer reviews may be utilized to meet this standard.

The major components of a peer review include observation, feedback, and strategizing. Direct observation of the clinician gives the peer reviewer genuine and detailed information needed to direct and support the clinician's skills. Feedback and strategizing create an interactive environment in which skill enhancement develops from the open dialogue between the clinician and the peer reviewer as does case conferencing and chart review. These methods aid the clinician in creating solutions for improving performance with the support of the peer reviewer.

Annual assessment of clinical skills by peer, supervisor, or physician are required of each PHN as follows:

- 1. The first 2 years of practice.
- 2. On an as needed basis dependent upon satisfactory performance in the first 2 years and ongoing satisfactory performance in the clinical area as supported by patient satisfaction, peer chart review and/or case conferencing.
- Direct observation should continue if the PHN fails to demonstrate satisfactory
  performance in the first two years or other concerns are raised that, in the judgment of
  the District Nursing Director or County Nurse Manager, require the process to
  continue.
- 4. Annual peer chart review is required and maintained if the PHN practices in a program area.

A sample of the <u>Peer Review Tool for the RN and APRN in Public Health</u>, along with guidance for completing each section, are listed as Attachment C in this manual. The Peer Review Tool may be used as a standard document or adapted locally. It can be applied more frequently than indicated above if a need arises (e.g. competency improvement or change of job assignment).

### **CHILD HEALTH**

NOTE: Required trainings to complete Form 3300 (CH 108, CH 110, CH 111, & CH 202), scoliosis screening (CH 203), and to collect labs for newborn screening (CH 102) or lead poisoning (CH 103) may be completed independently without completion of all Child Health trainings if nurse will not perform well check visits.

Learning Expectations – Initial Training The nurse must complete the following prior to practicing under nurse protocol: Self-Study	Comments/Notes	Course Duration	Date Completed and Initials
CH 101: Review Georgia Department of Public Health, Children's Health Programs and Services.	Objective: nurses will be familiar with various Children's Health Programs:  Babies Can't Wait Children 1st Children's Medical Services Early Hearing Detection & Intervention (EHDI) Georgia Autism Initiative Newborn Screening (NBS)	1 hour	
CH 102: Review the Newborn Screening Policy & Procedure Manual and watch the collection video	Objectives: nurses will obtain information regarding the importance of NBS during the newborn period and be able to collect adequate NBS specimens. This section also covers information on blood screening, EHDI, and critical congenital heart disease.	2 hours	
CH 103: Lead Poisoning  Review DPH Healthy Homes and Lead Poisoning Prevention Resources:	Description: this section includes information on guidelines in screening, reporting and managing blood levels in children.	1.5 hours	

		20/
Case Management Guidelines     Recommended Medical and Case     Management Actions and Retest     Chart  Review the CDC's article Blood Lead Levels     in Children and the 'Additional Resources' noted within the article.	Objectives:  a) Perform adequate lead blood screening. b) Educate parents on ways to reduce or eliminate dangerous lead sources in the environment.	
Watch the following videos:		
<ul> <li>Mission Unleaded: How to Test         Children for Lead with Maximum         Accuracy     </li> <li>Reduce the Risk: Preventing</li> <li>Childhood Lead Poisoning in Georgia</li> </ul>		
CH 104: Complete general review of pharmacology of drugs most commonly used to treat child health conditions listed in 2022 Child Health Nurse Protocols.	Objective: nurses will be familiar with the classification, dosage, routes of administrations, and side effects of medications used to treat conditions in the child health protocols.	1 hour
CH 105: Review the EPSDT Services – Health Check Program Manual.	Objectives: nurses will be able to:	2.5 hours
	a) List all the components required for a health check service.	
	b) Know how to adequately perform a health check visit based on the various components.	
CH 106: Complete Bright Futures Training.	Objectives:	3 hours
Review the following in the <u>Bright Futures</u> <u>Tool and Resource Kit, 2nd Edition</u> :  • Previsit Questionnaires	a) Identify the AAP recommended services required to be performed from newborn to adolescence	
Documentation Forms	b) Utilize the tools found within the Bright Futures guidelines to perform services adequately.	
<ul> <li>Parent &amp; Educational Handouts</li> </ul>		

CH 201: Attend Ages and Stages Questionnain provided by certified ASQ-3 and ASQ:SE Train		Description: tool used to assess psychomotor, neuro and emotional	8 hours	
DIDACTIC / CLASSROOM TRAINING COU (prerequisite self-study courses)	RSES	Comments/Notes	Course Duration	Date Completed and Initials
CH 112: Complete <u>Dyslipidemia Screening in</u> Children and Iron <u>Deficiency Anemia in</u> Children Protocol Training	Description: this course gives an overview of iron deficiency anemia and dyslipidemia and discusses causes, treatment and management.		2 hours	
CH 111: Complete Oral Health Screening and other Oral Health Considerations for the School Nurse and the PHN.	Description: reviews normal oral structure, common dental problems and how to complete the dental section of form 3300.		1 hour	
CH 110: Complete Hearing Screening Training to include the following:  a) Newborn Hearing Screening Training Curriculum, 2020 b) Hearing Screening Beyond the Newborn Period (training not currently available; contact DPH EHDI program).	Description: reviews importance of early identification of hearing loss, implications of hearing loss, how to complete a hearing screening in a PH clinic setting for different age groups, and instruction on how to refer to audiology for further testing if the hearing screening is not passed.		3 hours	
CH 109: Complete Modified Checklist for Autism in Toddlers – Revised Follow-up (MCHAT-R/F) Screening Tool Training.	use of th	Description: Reviews early screening for autism, use of the M-CHAT R/F screening tool, and referral for further evaluation.		
CH 108: Review Georgia DPH Form 3300: Certificate of Vision, Hearing, Dental, and Nutrition Screening.	review components that are needed to complete a screening certificate.		30 mins	
CH 107: Review HemoCue Hemoglobin Procedure package insert for your individual district. Example: HemoCue Hb 801 System: Operating Manual		e: Nurses will be able to adequately a HemoCue hemoglobin test	10 mins	

State office paid training on hold due to budget cuts. District can elect to provide locally via district funding if desired. Contact MCH for ASQ trainer information.	development of children ranging in age from newborn to six years.		
CH 202: Complete <u>Vision Screening Part 1</u> .  If the district utilizes PlusOptix or Welch Allyn photo screeners, also complete <u>Vision Screening Part 2</u> .  Complete the <u>Vision Screening Training Procedures Validation Form</u> with a PH nurse who has a current certification.	Description: course reviews common eye problems, how to conduct a vision screening in a PH office setting, and instruction on how to complete a vision screen using charts and automated vision screeners.	3 hours	Updated
CH 203: View CHOA's Curve Checks: Introduction to Scoliosis Screening video.  Review CHOA's Scoliosis Screening Reference Guide.	Objectives: to adequately perform a scoliosis screening and identify children with abnormal curvatures of the spine.	1 hour	Updated
CH 204: View the Pediatric Physical Exam Training Videos: Infant & Early Childhood and Middle Childhood & Adolescent.	Description: provides knowledge and skills to assess and document findings on pediatric and adolescent population.	3 hours	Updated
Preceptorship (prerequisites: self-study and	Comments/Notes		pleted and
didactic courses)		Initials	
A preceptor will observe the nurse performing the clinical procedures noted below, as indicated, for the following age groups:  Infants (less than 1 year old) Toddlers (1 year through 2 years of age) Preschool and school-age children (3 years through 10 years of age) Adolescent (11 through 19 years of age)		initials	

		20.
Hearing and Vision Screening		
Newborn Screening for Metabolic and Sickle     Cell Disorders, as indicated & age appropriate.		
5. Lead Screening		
6. Dental Examination		
7. Immunization		
8. Scoliosis Screening		
9. Ages and Stages Questionnaires		
10. Nutrition Screening		
11. Hemoglobin Screening		
Learning Expectations – Annual Training  The nurse must complete the following annually while practicing under nurse protocol:	Comments/Notes	Date Completed and Initials
Self-study		
<b>Review</b> Children's Health policies and procedures manuals and nurse protocols.		
Didactic/Classroom Training		
Participate in at least one Children's Health training.		
Clinical/Peer Review		
The supervisor or peer shall observe the nurse's performance during a well-check visit, to include health assessment, work-up, and client counseling, with an infant, child, and adolescent for at least the		

### **DIABETES**

Learning Expectations – Initial Training  NOTE: The nurse must complete the following training prior to practicing under nurse protocol.	Comments/Notes	Course Duration	Date Completed and Initials
Self-Study			
DM 101: Review Georgia DPH – <u>Diabetes website</u>	Objectives: nurses will understand the disease burden of diabetes in Georgia and locate statistics on diabetes in Georgia to assist them in working with patients.	10 mins	
<b>DM 102</b> : Review U.S. Preventive Services Task Force – <u>Prediabetes and Type 2 Diabetes Mellitus: Screening</u>	Objective: nurses will identify patients who should be screened for type 2 diabetes.	10 mins	
<b>DM 103</b> : Review Georgia DPH – <u>Standard Nurse Protocol</u> for <u>Diabetes Mellitus in Adults</u>	Objective: nurses will describe the process and guidelines for managing Type 2 diabetes.	1 hour	
DM 104: Complete Pharmacology for Diabetes webinar.	Objective: nurses will identify appropriate medications used in the treatment of diabetes.	1 hour	
DM 105: Read Standards of Medical Care in Diabetes- 2021, Diabetes Care 2020; 44 (Suppl. 1): S1-S2.	Objective: nurses will utilize standards of care for type 2 diabetes management.	30 mins	
DM 106: Complete Diabetes Self-Management and Education (DSME) Webinar	Objective: nurses will identify and refer patients to DSME program.	33 mins	
Didactic/Classroom Training	Comments/Notes	Course Duration	Date Completed and Initials

		20.
DM 201: View Physical Examination Training video.  DM 202: Attend the Hypertension and Diabetes Nurse	Objectives: nurses will understand the components and clinical skills involved in the physical assessment, ECG placement, and obtaining an accurate blood pressure measurement.	30 mins
Protocol Workshop.	Objectives:	12 hours
Emails regarding workshop offerings are sent out as workshops are available (approximately 3 times per year).	<ul> <li>a) nurses will be able to list the risk factors, diagnosis, and complications of diabetes.</li> </ul>	
Registration and course schedule will be posted on Exceed.	b) nurses will be able to differentiate primary and secondary hypertension.	
	c) nurses will be able to collaborate with the delegating physician to provide care for patients with diabetes and hypertension including pharmacologic and non-pharmacologic management.	
Clinical/Peer Review	Comments/Notes	Date Completed and Initials
A supervisor or peer shall review the nurse providing complete diabetes-related care including chief complaint, history of present illness, medical history, surgical history, social history, preventive services (e.g., mammogram, pap smear, colorectal screening, and immunizations), complete physical exam, counseling and motivational interviewing, lab work, and ordering/dispensing/administering medications under protocol for at least the first two years of practice or as indicated thereafter.		

### **Human Immunodeficiency Virus (HIV)**

HIV disease management is rapidly evolving. **PHN**s are expected to utilize the most up-to-date HIV-related guidelines such as U.S. Department of Health and Human Resources, Stanford University HIV Drug Resistance Database, and AIDS Education and Training Center as they become available.

NOTE: Trainings are required only for PHNs that will provide HIV management and treatment to individuals living with HIV.

Learning Expectations – Initial Training Self-study	Comments/Notes	Course Duration	Date Completed and Initials
HIV 101: Review the U.S. Department of Health and Human Services (DHHS) Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents Living with HIV:  • What's New in the Guidelines • Introduction • Baseline Evaluation • Laboratory Testing for Initial Assessment and Follow-up • Viral Load and CD4 Monitoring • Drug-Resistance Testing • Co-receptor Tropism Assays • HLA-B* 5701 Screening • Treatment Goals • Antiretroviral Drugs, Regimens, Components Not Recommended • Management of Treatment-Experienced Patient	Description: Core medical services provided in Ryan White funded clinics must be consistent with DHHS Clinical Guidelines for the Treatment of HIV, as well as other pertinent clinical and professional standards. The DHHS Panel on Antiretroviral Guidelines for Adults and Adolescents' primary goal is to provide HIV care practitioners with recommendations that are based on current knowledge of the antiretroviral (ARV) drugs that are used to treat adults and adolescents with HIV in the United States. Because the science of HIV evolves rapidly, the availability of new agents and new clinical data may change therapeutic options and preferences. The Panel frequently updates the guidelines and PHNs are expected	2 hours	

<ul> <li>Considerations for Antiretroviral         Use in Patients with Coinfections</li> <li>Adherence</li> <li>Adverse Effects of ARV</li> <li>Drug-Drug Interactions</li> </ul>	to maintain current knowledge of DHHS Guidelines Objective: Introduce the PHN to the DHHS Guidelines related to HIV Antiretroviral Therapy (ART).		
HIV 102: Review the DHHS Guidelines for the Prevention and Treatment of Opportunistic Infections (OIs) in Adults and Adolescents with HIV:  • What's New • Introduction • Candidiasis (Mucocutaneous) • Herpes Simplex Virus • Pneumocystis Pneumonia • Toxoplasma gondii Encephalitis • Varicella-Zoster Virus Disease • Immunizations for Preventable Diseases in Adults and Adolescents Living with HIV • Tables 1 through 8	Description: provides guidance to HIV care practitioners on the optimal prevention and management of HIV-related Ols. PHNs are expected to maintain current knowledge of updates to the Guidelines.	2 hours	
HIV 103: Complete the following AETC  National HIV Curriculum Les  "sons and Question Bank for each Lesson, including CE quiz:  a. Basic HIV Primary Care Overview  • Lesson 1 – Initial Evaluation  • Lesson 2 – Oral Manifestations  • Lesson 3 – Cutaneous Manifestations	Description: Comprehensive educational self-study courses to introduce a <b>PHN</b> to basic HIV/AIDS: screening, diagnosis, primary care, ART, and co-occurring conditions.  Objectives: It is the goal of the National HIV Curriculum to provide ongoing, up-to-date information needed to meet core competency	38 hours	

- Lesson 4 Immunizations in Adults
- Lesson 5 Primary Care Management
- b. Antiretroviral Therapy Overview
  - Lesson 1 Antiretroviral Medications and Initial Therapy
  - Lesson 2 Adverse Effects of Antiretroviral Medications
  - Lesson 3 Drug Interactions with Antiretroviral Therapy Medications
  - Lesson 4 Switching or Simplifying Antiretroviral Therapy Medications
  - Lesson 5 Evaluation and Management of Virologic Failure
- c. Co-occurring Conditions Overview
  - Lesson 1 Latent Tuberculosis Infection
  - Lesson 2 Opportunistic Infections: Prevention
  - Lesson 4 Sexually Transmitted Infections
  - Lesson 5 Hepatitis B Coinfection
  - Lesson 6 Hepatitis C Coinfection

knowledge for HIV prevention, screening, diagnosis, and ongoing treatment and care to healthcare providers in the United States.

Learners are required to join the GA-DPH Division of Clinical and Medical Services HIV Unit, National HIV Curriculum group. For information on how to join contact the Office of HIV/AIDS:

**Nurse Consultant:** 

sandra.metcalf@dph.ga.gov

Didactic/Classroom	Prerequisite: Completion of all self-study courses is highly recommended.	
<ul> <li>HIV 201: Complete one of the following courses on Adult HIV Course:</li> <li>IAS-USA HIV 101: Fundamentals of HIV Medicine, Initiation of Antiretroviral Therapy, and Primary Care for People with HIV.</li> <li>GA DPH, HIV Update/Nurse Protocol Training</li> <li>Or an equivalent training which includes an introduction to the following topics: <ul> <li>a. HIV pathogenesis and acute infection</li> <li>b. Antiretroviral therapy and viral resistance</li> <li>c. Symptomatic HIV and opportunistic infections</li> <li>d. Primary care recommendations for persons with HIV</li> <li>e. Medical complications in HIV management.</li> </ul> </li> </ul>	Description: Comprehensive course to introduce a PHN to core principles of HIV management, including pathogenesis of HIV infection, mechanism of action of antiretroviral drugs, initiating antiretroviral therapy, and primary care for persons with HIV.  Objectives: Learners will be able to describe:  • Events of early HIV infection  • Laboratory markers following HIV acquisition  • Basic mechanisms of antiretroviral therapy  • Antiretroviral regimens based on patient parameters  • Primary care recommendations for persons with HIV	2 - 8 hours

### **Preceptorship**

Preceptor will ensure a skilled clinician (HIV prescribing provider or RN with experience practicing under Adult with HIV Nurse Protocols) provides guidance and observes the nurse utilizing protocols to evaluate, assess, order labs/treatments/medications, educate/counsel, follow-up, and consult/refer as appropriate. The nurse must demonstrate competencies for all components of Adult with HIV Nurse Protocols to be used.

The number of observations may vary based upon the evaluation of the nurse's competency and performance.

Learning Expectations – Annual Training	Comments/Notes	Date Completed and Initials
Review <u>Adult with HIV Standard</u> Nurse Protocols.		
2. Review the DHHS <b>Clinical</b> Guideline Updates on <u>Use of ARVs</u> and <u>Prevention and Treatment of Ols</u> .		
3. Annually obtain a minimum of 15 contact hours of HIV-related continuing education (self-study or didactic/classroom), including HIV-related medication updates.	All continuing education contact hours must be approved by a state board of nursing, the American Nurses Credentialing Center, the Association of Nurses in AIDS Care, or the American Academy of Nurse Practitioners. Offerings less than 30 minutes duration (0.5 contact hours) are not accepted as continuing	
<ul> <li>Suggested resources include:         <ul> <li>AIDS Education and Training Center</li> </ul> </li> <li>National HIV Curriculum         <ul> <li>International Antiviral Society-USA</li> </ul> </li> <li>Georgia DPH</li> </ul>	education.	

### **Clinical / Peer Review**

A skilled clinician (HIV prescribing provider or RN/APRN with experience practicing under Adult with HIV Nurse Protocols) shall observe the nurse's performance and competency of all components of Adult with HIV Nurse Protocols for at least the first two years of practice or as indicated thereafter.

Annual chart review (minimum 10% of encounters) by a skilled clinician (HIV prescribing provider or RN/APRN with experience practicing under Adult with HIV Nurse Protocols) to assess appropriate usage and documentation of Adult with HIV Nurse Protocols.

### **HYPERTENSION**

Learning Expectations – Initial Training	Comments/Notes	Course Duration	Date Completed and Initials
HTN101: Review Georgia DPH – <u>High</u> Blood Pressure Control	Objectives: nurses will understand the disease burden of high blood pressure in Georgia and locate statistics on high blood pressure to assist them in working with patients.	10 mins	
HTN 102: Review U.S. Preventive Services Task Force: Hypertension in Adults: Screening.	Objectives: nurses will be able to define normal and abnormal blood pressure results, and identify clients who should be screened for hypertension.	10 mins	
HTN 103: Complete Blood Pressure Fundamentals: Teachings & Tools for Correct Blood Pressure Management.	Objective: nurses will be able to accurately measure blood pressure	75 mins	
HTN 104: Read Georgia DPH – Standard Nurse Protocol Nurse Protocol for Primary Hypertension in Adults	Objective: nurses will learn the process and guidelines for managing hypertension.	1 hour	
HTN 105: Read the Eighth Joint National Committee (JNC 8) Guidelines for the Management of Hypertension in Adults.	Objective: nurses will utilize standards of care for hypertension management.	15 mins	
HTN 106: Complete Pharmacology for Hypertension webinar.	Objective: nurses will identify medications used in the treatment of hypertension	30 mins	
Didactic/Classroom Training	Comments/Notes	Course Duration	Date Completed and Initials
HTN 201: View Physical Examination Training video	Objectives: nurses will understand the components and clinical skills involved in the physical	1 hour	

	assessment, ECG placement, and obtaining an accurate blood pressure measurement.		
HTN 202: Attend the Hypertension and Diabetes Nurse Protocol Workshop	Objectives:	12 hours	
Emails regarding 2-day workshop	<ol> <li>Nurses will be able to list the risk factors, diagnosis, and complications of diabetes.</li> </ol>		
offerings are sent out as workshops are available (approximately 3 times per year)	<ol><li>Nurses will be able to differentiate primary and secondary hypertension.</li></ol>		
Registration and course schedule will be posted on Exceed.	Nurses will be able to collaborate with the delegating physician to provide care for diabetes and hypertension patients including pharmacologic and non-pharmacologic management.		
Clinical/Peer Review	Comments/Notes		Date Completed and Initials
A supervisor or peer shall review the nurse providing complete hypertension related care including chief complaint, history of present illness, medical history, surgical history, social history, preventive services (e.g., mammogram, pap smear, colorectal screening, and immunizations), complete physical exam, counseling and motivational interviewing, lab work, and ordering/dispensing/administering medications under protocol for at least the first two years of practice or as indicated thereafter.			

### **IMMUNIZATION**

The DPH Georgia Immunization Program produces the <u>Georgia Immunization Program (GIP) Manual</u> based on the Advisory Committee on Immunization Practices recommendations that outline the policies and procedures for administering vaccines by RNs. All public health locations that provide vaccine services will utilize the current edition of the GIP Manual.

Learning Expectations – Initial Training	Comments/Notes	Course Duration	Date Completed and Initials
<ul> <li>IM 101: Epidemiology and Prevention of Vaccine-Preventable Diseases</li> <li>View CDC Pink Book webinar series</li> <li>Review resources:         <ul> <li>Pink Book Epidemiology &amp; Prevention of Vaccine Preventable Diseases-CDC</li> </ul> </li> <li>General Best Practice Guidelines for Immunization</li> <li>Manual for the Surveillance &amp; Reporting of Vaccine Preventable Diseases Manual, CDC</li> <li>Vaccine Preventable Disease Fact Sheets (GIP Manual: Chapter 6)</li> <li>Vaccine Preventable Diseases-DPH</li> </ul>	<ul> <li>Objectives: Nurses will be to:</li> <li>a. describe the difference between active and passive immunity</li> <li>b. locate resources regarding vaccine preventable diseases and vaccines that prevent them, and</li> <li>c. locate resources relevant to current immunization practice.</li> </ul>	24 hours	
IM 102: Vaccines for Children (VFC) Program  Complete the trainings:  • You Call the Shots: VFC  • You Call the Shots: Vaccine Storage and Handling  Review resources:	Description: The VFC program helps provide vaccines to children whose parents or guardians may not be able to afford them. This helps ensure that all children have a better chance of getting their recommended vaccinations on schedule.	3 hours	

			2022
<ul> <li>VFC Information for Providers</li> <li>VFC Routine and Emergency Vaccine Handling Plans (GIP Manual: Chapter 9)</li> <li>Vaccine Storage and Handling Toolkit, CDC</li> </ul>	Objectives: To describe VFC program requirements, billing practices, provider roles and responsibilities, and vaccine management practices.		
<ul> <li>IM 103: Vaccine Administration:</li> <li>Complete You Call the Shots: Vaccine Administration.</li> <li>Review How to Administer Intramuscular and Subcutaneous Vaccine Injections.</li> </ul>	Objectives: Nurses will be able to define steps for proper vaccine administration, understand the recommended sites for age-appropriate vaccine administration, and describe best practices to prevent vaccine administration errors.	1.25 hours	
<ul> <li>IM 104: Travel Vaccines Trainings: only complete if applicable per your Health District.</li> <li>Complete Yellow Fever Vaccine:         <ul> <li>Information for Health Care Professional Advising Travelers (Module 1 and 2)</li> </ul> </li> <li>Review Travel Vaccines: Training and Resources.</li> </ul>	Objectives: Nurse will be able to a. identify how the yellow fever virus is transmitted b. identify precautions and contraindications to administration of the yellow fever vaccine c. describe the information needed to conduct a pre-travel consultation about yellow fever vaccination.	2.5 hours	
<ul> <li>IM 105a: COVID-19 Vaccines</li> <li>Complete COVID-19 Vaccine Training Modules.</li> <li>Review CDC COVID-19 Vaccine Trainings, Webinars, and Reference Materials.</li> </ul>	Objectives: Nurse will describe  a. vaccine safety, development, and Emergency Use Authorization  b. storage and handling, vaccine preparation, administration, and documentation and reporting procedures for COVID-19 vaccines.	1.5 hours	
IM 105b: Just-in-Time Immunization Training for Temporary Staff During a Public Health Emergency  Option 1: Public Health Training Guide:	Description: Immunization training is required for temporary staff who will administer vaccines during a public health emergency (RNs, LPNs, APRNs, EMS providers, and students).  Two training options are available:	Option 1: 7 hours	

- Complete You Call the Shots:
   Understanding the Basics: General Best
   Practice Guidelines on Immunization
- Complete You Call the Shots: Vaccine Storage and Handling
- Complete <u>You Call the Shots: Vaccine</u> Administration
- Complete <u>COVID-19 Vaccine Training</u> Modules, if applicable
- View Monkeypox Education, Testing, & Vaccination Training, if applicable
  - Temporary nursing staff may access the <u>DPH Monkeypox</u> <u>Training on Webex</u>. Password: m7QYWyG24b2
- View <u>How to administer a JYNNEOS</u> vaccine intradermally - YouTube
- Complete <u>You Call the Shots: Vaccine</u> <u>Specific Training</u> (e.g., Meningococcal, MMR, Varicella- if applicable)
- Review <u>Georgia Registry of</u> <u>Immunization Transactions & Services</u> (GRITS)
- Access Vaccine Information Statements
- Review <u>Vaccine Adverse Event</u>
   <u>Reporting System</u> (<u>GIP Manual</u>: Chapter
- Complete preceptorship <u>immunization</u> <u>clinical skills checklist (GIP Manual: Chapter 13)</u> with a minimum of two observed administration techniques (e.g., intradermal, subcutaneous, intramuscular) per age group, as indicated.

- The Public Health Training Guide is the vaccine training requirements that should be used for temporary staff to the extent possible. It includes comprehensive training which is important for staff who may not have been administering vaccinations in their previous practice settings.
- The Just-in-Time Training Guide includes a more streamlined training option when there are time constraints or past vaccine experience, and training are factors.

Option 2:

3.7 Hours

			2022
Option 2: Just-in-Time Training Guide:  • Complete EZIZ Lesson: Preparing Vaccines  • Complete EZIZ Lesson: Administering Vaccines  • Complete EZIZ Lesson: Storing Vaccines  • Complete COVID-19 Vaccine Training Modules, if applicable  • View Monkeypox Education, Testing, & Vaccination Training, if applicable  ○ Temporary nursing staff may access the DPH Monkeypox Training on Webex. Password: m7QYWyG24b2  • View How to administer a JYNNEOS vaccine intradermally - YouTube  • Complete preceptorship to include documentation of immunization clinical skills checklist (GIP Manual: Chapter 13) with a minimum of two observed administration techniques (e.g.			2022
administration techniques (e.g., intradermal, subcutaneous, intramuscular) per age group, as			
<ul> <li>indicated.</li> <li>IM 106: Review the following immunization forms, reports, &amp; records:         <ul> <li>a. GRITS:</li> <li>Patient Immunization Record: Access and query for an existing immunization record to determine current immunization status and need for vaccination</li> <li>Coverage Reports (e.g., childhood, adolescents, adults)</li> </ul> </li> </ul>	Objective: Nurses will be able to:  a. access and utilize immunization related forms, reports, and records b. accurately document vaccines in GRITS and print certificates of immunization c. describe documentation and reporting procedures for vaccine adverse events	16 hours	

			2022
<ul> <li>b. Vaccine Information Statements</li> <li>c. Forms for childcare and school attendance</li> <li>Certificate of Immunization (Form 3231)</li> <li>Religious Objection (Form 2208)</li> <li>Requirements of School/ Child Care Law (GIP Manual: Chapter 5)</li> <li>d. VFC Provider Agreement (GIP Manual: Chapter 9)</li> <li>e. Eligibility Criteria for Vaccines Supplied by the GIP</li> <li>f. Informed Consent (GIP Manual: Chapter 3)</li> <li>g. Vaccine Adverse Event Reporting System (GIP Manual: Chapter 4)</li> <li>h. Recall of Patients/ Moved or Gone Elsewhere (GIP Manual: Chapter 8)</li> <li>i. Notifiable Disease Reports (GIP Manual: Chapter 6)</li> <li>j. Immigration Form (USCIS Form I-693</li> <li>k. Immunization Quality Improvement for Providers (IQIP).</li> <li>The State Immunization Regional Consultant will schedule an immunization QI plan with the health district.</li> <li>l. Refugee Health Program-DPH</li> </ul>	Georgia Immunization Program "On-Call": (404)657-3158 or DPH-Immunization@dph.ga.gov		
DIDACTIC/CLASSROOM			
IM 201: Attend a training session on: GA Requirements for School and Child Care Attendance May be provided by a district "trainer" or Immunization Regional Consultant.	Objectives: to describe Georgia immunization law & DPH rules and regulations for Georgia immunization certificates and describe standards for issuing and filing certificates of immunization.	1.5 hours	

Preceptorship/Clinical: The extent and duration may vary according to the needs of each nurse.

There shall be documentation that the nurse can satisfactorily perform the required clinical skills on the <u>immunization</u> <u>clinical skills checklist (GIP Manual: Chapter 13)</u> and that the preceptor has observed the required encounters prior to the nurse being allowed to administer vaccines without direct supervision. The minimum number of observed encounters should be two per age group indicated (infants, children/adolescents, and adults).

Learning Expectations – Annual Training	Comments/Notes	Date Completed and Initials
<ul> <li>You Call the Shots: Vaccine Administration</li> <li>You Call the Shots: Vaccine Storage and Handling</li> <li>You Call the Shots: VFC</li> <li>Review Recommended Immunization Schedule for children, adolescents, and adults:         <ul> <li>Attend a GIP review of the schedule update or view:</li></ul></li></ul>	4 hours	
Clinical/Peer Review  The supervisor or peer shall observe the nurse's performance and competency with vaccine preparation and administration (following the immunization skills checklist) for each age group indicated for at least the first two years of practice or as indicated thereafter.		

# NON-OCCUPATIONAL POST-EXPOSURE PROPHYLAXIS (nPEP) USE IN THE PREVENTION OF SEXUALLY TRANSMITTED DISEASES AND BLOODBORNE PATHOGENS

NOTE: Required trainings only for nurses providing care to clients under the nPEP protocol.

NOTE. Required trainings only for harses providing care to chemis under the III Er protocol.			
Learning Expectations – Initial Training  The nurse must complete the following prior to practicing under nurse protocol:  Self-Study EXCEED	Comments/Notes	Course Duration	Date Completed and Initials
PP 101: Read the Standard Nurse Protocol for nPEP Use in the Prevention of Sexually Transmitted Diseases and BloodBorne Pathogens.  Complete initially and annually.	GA DPH guidelines and standards for nurses practicing under the nPEP protocol.	2 hours	
PP 102: Complete the National HIV Curriculum Module 5 (Prevention of HIV), Lesson 4: nPEP and successfully pass the question bank with a minimum score of 80%.	Description of the module and objectives are provided at the beginning of the module.	8 hours	
<ul> <li>If questions arise in signing up for this group, contact:</li> <li>Sandra Metcalf: Sandra.metcalf@dph.ga.gov</li> <li>Sign up for the GA-DPH Division of Clinical &amp; Medical Services: HIV Unit when completing Module 5, Lesson 4.</li> </ul>			
PP103: View the nPEP Update Webinar. Password: jYWABj5b	Objectives: outline the current Georgia STI landscape, describe HIV prevention modalities & potential barriers to access, and summarize nPEP.	2 hours	

### OTHER INFECTIOUS DISEASES

Learning Expectations – Initial and Annual Training	Comments/Notes	Course Duration	Date Completed and Initials
OID 101: Review Georgia Public Health Laboratory Services Manual, pp 50-53 and 97-98.  Read Pertussis: Specimen Collection and Shipping Instructions.	Objectives: The nurse will demonstrate proper technique for collecting, packaging, and shipping stool specimens and nasopharyngeal swabs.	10 mins	
OID 102: Watch Stool Specimen Collection video.	Objective: the nurse will educate patients on proper collection technique.	5 mins	
View client instruction sheet: How to Collect a Stool Specimen for the Health Department.	NOTE: these resources were not created by DPH but the instructions on specimen collection are accurate.		
OID 103: Watch Nasopharyngeal swab specimen collection video.	Objective: the nurse will demonstrate correct collection technique.	4 mins, 12 secs	
OID 105: Watch Penicillin IM Administration video.	Objective: the nurse will demonstrate correct <b>IM</b> injection technique <b>in the dorsogluteal muscle</b> .	2 mins, 33 secs	
OID 106: Surveillance of Vaccine Preventable Diseases (VPD) Course – view the recording and associated files: Session I and II available on CDC website	Objectives: discuss the importance of VPD surveillance and case identification; describe the appropriate application of case definitions and clinical descriptions; list the most appropriate pathogen-specific laboratory test(s) for surveillance; and list epidemiologically important data to collect for surveillance.	3 hours	

## PRE-EXPOSURE PROPHYLAXIS (PrEP) USE IN THE PREVENTION OF HIV

NOTE: Required trainings only for nurses providing care to clients under the PrEP protocol.

Learning Expectations – Initial Training  The nurse must complete the following prior to practicing under nurse protocol:  Self-Study EXCEED	Comments/Notes	Course Duration	Date Completed and Initials
PR 101: Read the Standard Nurse Protocol for PrEP Use in the Prevention of HIV. Complete initially and annually.	GA DPH guidelines and standards for nurses practicing under the PrEP protocol.	2 hours	muais
PR 102: Complete the National HIV Curriculum Module 5 (Prevention of HIV), Lesson 5: PrEP and successfully pass the question bank with a minimum score of 80% If questions arise in signing up for this group, contact:  • Sandra Metcalf: Sandra.metcalf@dph.ga.gov Sign up for the GA-DPH Division of Clinical & Medical Services HIV Unit when completing Module	Description of the module and objectives are provided at the beginning of the module.	8 hours	
5, Lesson 5.  PR 103 (prerequisites PR 101 and PR 102): View the PrEP Training Webinar.  Password: gNT6HNpY	Objectives: describe HIV prevention modalities and potential barriers to access, review future directions for medication delivery and vaccines, and discuss PrEP assessment, medications & follow up.	1.5 hours	

## SEXUALLY TRANSMITTED DISEASE (STD)

Learning Expectations – Initial Training	Comments/Notes	Course Duration	Date Completed and Initials
STD 101: Read the Standard Nurse Protocols for Sexually Transmitted Infections.  Review the following resources on pharmacology:	Objective: Nurses will understand the pharmacology of medications used in the treatment of STDs.	8 hours	
<ul> <li>Nursing 2022 Drug Handbook Forty Edition</li> <li>Davis's Drug Guide for Nurses 17th Edition</li> <li>Epocrates</li> <li>UpToDate</li> </ul>			
STD 102: Complete the following  National STD Curriculum Lessons and applicable question bank:  Chlamydia Gonorrhea Syphilis HSV HPV PID Vaginitis	<ul> <li>Objectives:</li> <li>Summarize the epidemiology and discuss the clinical manifestations.</li> <li>Compare the common laboratory diagnostic methods used to diagnose.</li> <li>State routine screening recommendations.</li> <li>List the CDC recommended treatment regimens.</li> </ul>	7 <b>-8</b> hours	
<ul> <li>STD 104: STD 101</li> <li>Day 1: Microsoft Teams WH         <ul> <li>101: Women's Health Exam</li> <li>(virtual)</li> </ul> </li> </ul>	<ul><li>Objectives:</li><li>Describe how to take a sexual history.</li><li>List the diagnostic methods used to diagnose.</li></ul>	3 days	

Preceptorship (prerequisite all self-stud	ly and didactic courses)	Comments/Notes	Date Completed	
<ul> <li>Day 2: Microsoft Teams STD 101 (virtual)</li> <li>Day 3: In-Person Clinical Skills Practicum</li> </ul>	<ul> <li>Summarize the intent of the 340B program.</li> <li>Discuss the use of STD Approval Codes</li> <li>Review the screening criteria for chlamydia and gonorrhea for different client populations.</li> </ul>			

Preceptorship (prerequisite all self-study and didactic courses)	Comments/Notes	Date Completed and Initials
The nurse must demonstrate competency in physical assessment and management of at least 10 patients to include male and female patients. This includes the following: complete history, focused STD exam, performing or ordering lab tests as indicated, demonstrating knowledge of proper infection control procedures while handling specimens, patient management, patient education, ordering/dispensing/administering drugs, and documentation.	The extent and duration of the preceptorship will vary per the competency of the individual nurse.	
Learning Expectations – Annual Training	Comments/Notes	Date Completed and Initials
Review the Standard Nurse Protocols for Sexually Transmitted Infections.		
Every 2 years, participate in a webinar or training containing STD related content (e.g., Georgia DPH/Southeast STI/HIV Update, National STD Curriculum Modules, Syphilis Case Management course, in-service programs or professional conferences).		
Clinical/ Peer Review	Comments/Notes	Date/Initials
A supervisor/peer must observe the nurse in performing a complete history, focused STD exam, performing/ordering laboratory tests, ordering/dispensing/administering		

## TUBERCULOSIS (TB)

Learning Expectations – Initial Training  The nurse must complete the following prior to practicing under nurse protocol:  Self-Study	Comments/Notes	Course Duration	Date Completed and Initials
TB 101: Complete CDC's Tuberculosis 101 for Healthcare workers.	Series of TB educational modules.	1-2 hours	
TB 102: Complete CDC's Core Curriculum on TB: What the Clinician Should Know and/or CDC's Self-Study Modules on TB.	Series of TB educational modules.	6-8 hours	
TB 103: Review Georgia TB Program Policy and Procedure Manual, current edition.	Objectives: Describes the GA DPH TB program procedures, policies, guidelines and recommendations to support TB program services.	6 hours	
TB 104: Review Georgia TB Reference Guide, current edition.	Objectives: Describes GA DPH TB Program mission and objectives. Provides TB information on screening and evaluation of clients for TB or latent TB infection (LTBI) with treatment goals and objectives towards completion of evaluation and adequate treatment.	3 hours	
Didactic/Classroom Training	Comments/Notes	Course Duration	Date Completed and Initials

TB 201: Complete one of the following courses:  Online TB Update and Skin Test Certification Course (complete skills validation under supervision after online course requirements are fulfilled)  OR TB Update & Tuberculin Skin Test (TST) Certification Workshop provided by State TB Office/District TB Coordinator/Certified Instructor. Contact District TB Coordinator or State Office Nurse. Access training schedule and registration forms.	Objectives:  1. Identify 3 factors that can influence TB transmission.  2. Explain the difference between LTBI and active TB disease.  3. Recognize and list the symptoms of pulmonary TB.  4. List 5 steps for TB screening.  5. Demonstrate the proper method of TST administration, measurement of induration and interpretation of results.	6 hours
<b>TB 202:</b> TB program updates (to include medication updates) provided by State, District or local staff.	Description: DPH TB program provides support to District TB program through real time evaluation of patient's treatment progress, contact investigations, and Directly Observed Therapy (DOT) and Video Directly Observed Therapy (VDOT) towards achieving stated GA TB mission.	1 – 2 hours
TB 203: Complete one of the following courses:  DPH TB Case Management Training  OR  Southeastern National TB Center TB Case Management Course (offered several times a year)	<ol> <li>Define and outline the goals of case management.</li> <li>Relates the tasks of case management to the National TB Indicator goals.</li> <li>Summarize the process of patient assessment, medical evaluation and treatment plan.</li> <li>Compare the initial phase and continuation phase of TB treatment.</li> </ol>	8 hours OR 32 hours

OR  Heartland National TB Center Essentials of TB Case Management (online live interactive offered several times a year):	<ul><li>5. Perform DOT Dose Counting to ensure adequate completion of treatment.</li><li>6. Formulate a case management plan for a case study.</li></ul>	OR 8 hours
TB 204: TB Contact Investigation/DOT class (once initially). No online option. Access training schedule and registration forms.  OR  Curry International TB Center TB Contact Investigation Course (offered twice a year)	Objectives:  1. Identify 6 index case characteristics used in in determining the priority of an investigation.  2. List 4 factors used to decide the priority of a contact.  3. Discuss the time frame in which high and medium priority contacts should be screened.  4. Demonstrate open-ended questions.	8 hours
TB 205: Complete TB DOT Training (includes VDOT):  NOTE: Before taking this course, you must have first completed TB 101 and TB 201.	Objectives:  1. Understand the purpose of DOT.  2. State the responsibilities, as well as limitations, of the DOT provider.  3. List common side effects of frequently used TB medications, as well as adverse side effects that must be reported immediately to the case manager.  4. Verbalize the procedure for patients who fail to show for their DOT appointments.  5. Follow the appropriate infection control guidelines for each patient.	2 hours

Preceptorship		Comments/Notes	Date Completed and Initials		
1.	After attending the TB Update of Skin Test Certification Course, complete the Skills Validation component of the Skin Test Certification documented by supervisor and returned to the State TB Office at TBNurse@dph.ga.gov.	Objectives:  A certificate would be issued after completion of the TB Update of Skin Test Certification Course and the participant demonstrates mastery and competence in the placement, reading, and analysis of tuberculin skin testing.	2 hours		
2.	Nurse observes preceptor in clinical setting followed by the preceptor observing the nurse perform TB services of initial and ongoing health assessment (to include TB screening), initial and monthly evaluation of LTBI and active TB cases, ordering & dispensing and/or administration of drugs, patient education/counseling, DOT & contact investigation as available in the county.	The extent and duration of the preceptorship will vary per the competency of the individual nurse.	4 – 8 hours		
The n	urse must complete the following ally or as otherwise indicated while cing under nurse protocol:	Comments/Notes	Date Completed and Initials		

Annually, a certified supervisor or peer shall observe the nurse performing one TST placement and one TST reading to maintain proficiency.		
An annual peer chart review performed by a supervisor or peer with experience practicing under TB protocols to assess appropriate usage and documentation of TB protocols.	Objectives:  Provides real time evaluation of TB cases and suspects, in collaboration with District's TB staff, with respect to patient's treatment progress, contact investigation and <b>DOT</b> to meet GA stated recommendations.	3 – 4 hours
Clinical/ Peer Review		
Observe and review the nurse performing TB services such as initial & ongoing health assessment (to include TB screening), initial or monthly evaluation of LTBI and active TB cases, contact investigation, ordering and dispensing and/or administration of drugs, patient education/counseling and DOT or VDOT for at least the first two years of practice or as indicated thereafter.		

#### **WOMEN'S HEALTH/FAMILY PLANNING**

See end of document for APRN requirements\*

Learning Expectations – Initial Training The nurse must complete the following prior to practicing under nurse protocol:  Self-Study	Comments/Notes	Course Duration	Date Completed and Initials
<ul> <li>WH101: Read the following chapters in Hatcher, Robert, Contraceptive Technology (current edition):</li> <li>Choosing a Contraceptive: Efficacy, Safety and Personal Considerations</li> <li>Fertility Awareness-Based Methods</li> <li>Pregnancy Testing and Assessment of Early Normal and Abnormal Pregnancy</li> </ul>	Description and objectives: Introduction to the availability of contraceptive methods (including hormonal and nonhormonal options) and pregnancy testing to expand the understanding of the PHN. The nurse will be able to understand the basic concepts of pregnancy testing and describe the efficacy of contraceptive methods from least effective to most effective.	1 hour <b>&amp;</b> 15 mins	
WH 102: Read Georgia Family Planning Program Services Manual (current edition).	Description and objectives: Introduction to the Georgia Family Planning Program (including the program's goals, principles, and priorities) to increase the knowledge of the PHN. At the completion of the training, the nurse will be able to list the primary goal of the Georgia Family Planning Program and identify core services provided.	1 hour	
WH 103: Read BCCP Policy and Procedure Manual	Description and objectives: Summary of the Georgia BCCP Program including a review of	3 hours	

	the available clinical services for breast and cervical assessment. At the completion of the training, the nurse will be able to explain the routine cervical cancer screening criteria and describe normal versus abnormal clinical breast exam findings.		
<ul> <li>WH104: Review the following CDC         Contraceptive Guidance for Health Care         Providers:         <ul> <li>Providing Quality Family Planning</li></ul></li></ul>	Description and objectives: Introduction to the concepts of contraceptive guidance using evidence-based recommendations and the relation of those concepts to PHN practice. The nurse will be able to discuss the components of a Women's Health assessment and the use of contraceptive methods in patients with identified health risks or medical conditions.	4 hours	
<ul> <li>WH105: Review Georgia laws regarding minors and reproductive health services (contraception; pregnancy related care; abortion; STD and HIV care; drug and alcohol care).</li> <li>Minors Access to Contraceptive Services</li> <li>O.C.G.A. § 31-9-2</li> </ul>	<b>Description and objectives:</b> Overview of Georgia laws regarding minors and the relation of those laws to the delivery of Women's Health clinical services. The nurse will be able to explain a minor's access to Women's Health services.	15 mins	
WH106: Complete SOAR to Health and Wellness Human Trafficking Training  OR	<b>Description:</b> The webinars address how to know when someone is a victim of human trafficking and the best ways to respond to her/him.	1.5 hours	
CHOA: The Fundamentals of Child Sex Trafficking	<b>Objectives:</b> Recognize the signs of a human trafficking victim and describe the steps to take to assist victims of human trafficking.		

WH 107: Contraceptive Technology I	Description and objectives: This course	10.5	
<ul> <li>To successfully complete this course, the nurse will need to pass each module with at least 80% proficiency.</li> </ul>	consists of 10 modules related to contraceptive technology.	hours	
WH 108: Contraceptive Technology II	Description and objectives: This course	10 hours	
<ul> <li>To successfully complete this course, the nurse will need to pass each module with at least 80% proficiency.</li> </ul>	consists of 10 modules related to contraceptive technology.		
Didactic/ Classroom Training (recommend all self-study trainings completed as a prerequisite)	Comments/Notes	Course Duration	Date Completed and Initials
WH 201: The Women's Health Exam and Issues Affecting Women through the Ages:	<b>Description and objectives:</b> Nurses will be able to identify two physical assessment	3 days	
<ul> <li>Day 1: Microsoft Teams WH 101: Women's Health Exam (virtual)</li> <li>Day 2: Microsoft Teams STD 101 (virtual)</li> <li>Day 3: In-person Clinical Skills Practicum</li> </ul>	techniques for each body system assessed as part of the Women's Health Assessment. The nurse will correctly demonstrate, through return demonstration using MammaCare breast model and Pelvic Mentor device, the correct technique and skill for correctly completing a clinical breast exam and pelvic exam.		
Preceptorship (prerequisite all self-study and didactic courses)	Comments/Notes		Date Completed and Initials
The nurse must demonstrate competency in physical assessment and management of at least 10 patients. This includes the following:	management of at according to the competency of each individual nurse.		

complete history, breast and pelvic exam, performing or ordering lab tests as indicated, enrollment in the breast and cervical cancer program (BCCP), client management, client education, dispensing contraceptive methods and documentation.		
Learning Expectations – Annual Training  The nurse must complete the following annually or as otherwise indicated while practicing under nurse protocol:  Self-Study	Comments/Notes	Date Completed and Initials
Remain current Women's Health policies and procedures manuals and nurse protocols:  Review Women's Health Nurse Protocol.  Review Family Planning Manual.  Review BCCP Policy and Procedure Manual.		
Didactic / Classroom Training		
Participate in at least one training per year on Women's Health services by webinar, elearning (archived webinars, online courses, self-paced learning modules), professional conferences, in-service programs, or training conducted by Medical Consultant or designated trainer.		

Clinical/ Peer Review	
A supervisor or peer must observe the RN or APRN in performing a complete history, physical assessment, laboratory tests (as indicated), and contraceptive management for at least the first two years of practice or as indicated thereafter.	

<sup>\*</sup>APRNs providing services to family planning patients should complete the following self-study areas: Chapters in Hatcher/Contraceptive Technology, GA Family Planning Services Manual, BCCP Breast and Cervical Manuals, GA Laws regarding minors, human trafficking, STD Protocols, CDC Contraceptive Guidance for Health Care Professionals (3 documents), Contraceptive Technology I & II. The APRN's specialty certification as well as the APRN's education, professional experience and clinical skills will determine the need for other training/education (e.g., The Women's Health Exam class, STD self-study, STD classes, breast and pelvic exams) and the need for observed exams.

# Policy and Procedure Manual for Public Health Nurse Training

# **Attachments**

#### Attachment A: Outline of Initial Program Standards and Training for Public Health Nurses (example)

#### I. Required for PHNs Providing any of the Following Services: 32.25 hours

- a. Dispensing Medications: <u>340B University OnDemand</u> Trainings (Introduction to Program, Eligibility Overview, & Compliance Cornerstones): 1.25 hours
- b. Tuberculin Skin Test Certification: 7 hours
  - i. Complete CDC's TB 101 for Healthcare Workers: 1-2 hours
  - ii. Complete TB Update and Skin Test Certification: 6 hours
- c. Scoliosis Screening (Form 4400): 1 hours
  - iii. View CHOA's Curve Checks: Introduction to Scoliosis Screening video: 1 hour
- d. Newborn Screening Specimen Collection: 2 hours
- e. Lead Poisoning Screening: 1.5 hours
- f. Vision, Hearing, Dental, and Nutrition Screening (Form 3300): 7.5 hours
  - iv. Review GA DPH Form 3300: 0.5 hours
  - v. Complete <u>Hearing Screening Training</u>: 3 hours
  - vi. Complete Oral Health Screening and other Oral Health Considerations for the School Nurse and the PHN: 1 hour
  - vii. Complete <u>Vision Screening Part 1</u> and <u>Validation Form</u>: 3 hours
- g. HIV Counseling, Testing, and Linkage Course: 12 hours
  - viii. Register and complete two-day (5 hours per day) virtual or in-person course: 10 hours

#### **II. Training Required to Practice Under Protocols:**

- a. Immunization
  - i. Self-study: 47.25 hours
    - 1. Epidemiology and Prevention of Vaccine-Preventable Diseases- View <u>CDC Pink Book webinar</u> series and resources: 24 hours
    - 2. Complete You Call the Shots trainings: <u>Vaccines for Children</u> and <u>Vaccine Storage and Handling</u>: 3 hours
    - 3. Complete <u>You Call the Shots: Vaccine Administration</u> and review <u>How to Administer Intramuscular and Subcutaneous Vaccine Injections</u>: 1.25 hours
    - 4. Complete COVID-19 Vaccine Training Modules and review CDC reference materials: 1.5 hrs
    - 5. View Monkeypox Education, Testing, & Vaccination Training: 1 hour
    - 6. View How to administer a JYNNEOS vaccine intradermally YouTube

- 7. Review Immunization Program forms, reports, and records: 16 hours
- 8. Attend a GA Requirements for School and Child Care Attendance training session: 1.5 hours
- ii. Preceptorship: Complete the <u>immunization clinical skills checklist (GIP Manual: Chapter 13)</u>: a minimum of two observed immunization encounters per age group (e.g., infants, children, and adults)
- b. Women's Health
  - i. Self-study: 36.25 hours
    - 1. Read Hatcher, Robert, Contraceptive Technology (current edition): 1.25 hours
    - 2. Read Georgia Family Planning Services Manual: 1 hour
    - 3. Read BCCP Policy and Procedure Manual: 3 hours
    - 4. Review CDC Contraceptive Guidance for Health Care Providers: 4 hours
    - 5. Contraceptive Technology I: 10.5 hours
    - 6. Contraceptive Technology II: 10 hours
    - 7. Read Standard Nurse Protocols for Women's Health: 6.5 hours
  - ii. Didactic: 24 hours (16 hours via Teams; 8 hours in-person)
    - 1. Women's Health Course and STD 101 Workshop
      - a. Day 1: Microsoft Teams WH 101: Women's Health Exam (virtual)
      - b. Day 2: Microsoft Teams STD 101 (virtual)
      - c. Day 3: In-person Clinical Skills Practicum
  - iii. Preceptorship:
    - 1. Nurses must demonstrate competency in physical assessment and management of at least 10 patients including breast and pelvic exams, microscopic assessment, and contraceptive management.
- c. Sexually Transmitted Infections
  - i. Self-study: 16 hours
    - 1. Read the <u>Standard Nurse Protocols for Sexually Transmitted Infections</u> and review the <u>pharmacology of STD Drugs resources</u>: 8 hours
    - 2. Complete the National STD Curriculum Lessons and question bank: 7-8 hours
  - ii. Didactic: STD 101 Workshop (details noted above in Women's Health section)
  - iii. Preceptorship
    - Nurses must demonstrate competency of at least 10 patients, men and women, including physical assessment, specimen collection, microscopic assessment, and diagnostic assessment.
- d. Tuberculosis

NOTE: Required trainings for nurses involved in case investigation and management.

- i. Self-study: 18 hours
  - 1. Complete <u>CDC's Core Curriculum on TB: What the Clinician Should Know</u> and/or <u>CDC's Self-Study Modules on TB</u>: **6-8 hours**
  - 2. Review Georgia TB Program Policy and Procedure Manual: 6 hours
  - 3. Review Georgia TB Reference Guide: 3 hours
  - 4. Read Standard Nurse Protocols for Tuberculosis: 2 hours
- ii. Didactic: 7.5 hours
  - 1. Complete a TB Case Management Training: 3.5 hours
  - 2. Complete a TB Contact Investigation and Directly Observed Therapy Training: 8 hours
  - 3. Complete TB DOT Training: 2 hours
- iii. Preceptorship
  - Preceptor observes the nurse performing TB services of initial and ongoing health assessment (to include TB screening), initial and monthly evaluation of LTBI and active TB cases, ordering & dispensing and/or administration of drugs, patient education/counseling, DOT & contact investigation as available in the county.
- e. <u>Hypertension</u>
  - i. Self-study: 3.5 hours
    - 1. Review <u>DPH High Blood Pressure Control</u>: 0.25 hours
    - 2. Review Hypertension in Adults: Screening: 0.25 hours
    - 3. Complete <u>Blood Pressure Fundamentals: Teachings & Tools for Correct Blood Pressure Management</u>: 1.25 hours
    - 4. Read Standard Nurse Protocol Nurse Protocol for Primary Hypertension in Adults: 1 hour
    - 5. Read the <u>Eighth Joint National Committee (JNC 8) Guidelines for the Management of Hypertension in Adults</u>: 0.25 hours
    - 6. Complete Pharmacology for Hypertension webinar: 0.5 hours
  - ii. Didactic: 12.5 hours
    - 1. DM/HTN 201: View Physical Exam Video: 1 hour
    - 2. DM/HTN 202: Attend the HTN and Diabetes Nurse Protocol Workshop: 12 hours
      - a. NOTE: Course currently being revised with new location
- f. <u>Diabetes</u>

- i. Self-study: 3.5 hours
  - 1. Review DPH Diabetes website: 0.25 hours
  - 2. Review Prediabetes and Type 2 Diabetes Mellitus: Screening: 0.25 hours
  - 3. Read Standard Nurse Protocol for Diabetes Mellitus in Adults: 1 hour
  - 4. Complete Pharmacology for Diabetes webinar: 1 hours
  - 5. Read <u>Standards of Medical Care in Diabetes- 2021, Diabetes Care 2020; 44 (Suppl. 1): S1-S2: 0.5 hours</u>
  - 6. Complete Diabetes Self-Management Education webinar: 0.5 hours
- ii. Didactic: As noted above in Hypertension
- g. Child Health

NOTE: Required trainings for nurses performing well-check visits.

- i. Self-study: 10.75 hours
  - Review Georgia Department of Public Health, Children's Health Programs and Services: 1 hour
  - 2. Review pharmacology of drugs listed in 2022 Child Health Nurse Protocols:1 hour
  - 3. Review the EPSDT Services Health Check Program Manual: 2.5 hours
  - 4. Complete Bright Futures Training: 3 hours
  - 5. Review HemoCue Hemoglobin package insert used in your district: 0.25 hours
  - 6. Complete <u>Modified Checklist for Autism in Toddlers Revised Follow-up Screening Tool</u> Training: 1 hour
  - 7. Complete <u>Dyslipidemia Screening in Children and Iron Deficiency Anemia in Children Protocol</u>
    <u>Training</u>: 2 hours
- ii. Didactic: 11 hours
  - 1. Attend Ages and Stages Questionnaire provided by certified trainer: 8 hours
  - 2. View the <u>Pediatric Physical Exam Training Videos: Infant & Early Childhood and Middle Childhood & Adolescent:</u> 3 hours
- iii. Preceptorship:
  - 1. Age-appropriate physical assessment checkoffs should be completed for all nurses who will be providing health checks for infants and children.
- h. Pre-exposure Prophylaxis (PrEP)
  - i. Self-study: 11.5 hours

- 1. Read the Standard Nurse Protocol for PrEP Use in the Prevention of HIV: 2 hours
- 2. Complete the National HIV Curriculum Module 5 (Prevention of HIV), Lesson 5: PrEP and question bank: 8 hours
- 3. View the <a href="Pred">Pred Training Webinar</a>: (Password: gNT6HNpY): 1.5 hours
- i. Non-occupational Post-Exposure Prophylaxis (nPEP)
  - i. Self-study: 12 hours
    - 1. Read the <u>Standard Nurse Protocol for nPEP Use in the Prevention of Sexually Transmitted</u>
      <u>Diseases and BloodBorne Pathogens: 2 hours</u>
    - 2. Complete the <u>National HIV Curriculum Module 5 (Prevention of HIV)</u>, <u>Lesson 4: nPEP</u> and question bank: 8 hours
    - 3. View the nPEP Update Webinar: (Password: jYWABj5b): 2 hours
- j. <u>HIV</u>

NOTE: Required trainings for nurses involved in HIV management.

- i. Self-study: 50 hours
  - 1. Review the DHHS <u>Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents</u> <u>Living with HIV: 2 hours</u>
  - 2. Review the DHHS <u>Guidelines for the Prevention and Treatment of Opportunistic Infections in</u>
    Adults and Adolescents with HIV: 2 hours
  - 3. Complete the following <u>AETC National HIV Curriculum Course Lessons and question bank</u>: 38 hours
    - a. Basic HIV Primary Care Overview (Lessons 1-5)
    - b. Antiretroviral Therapy Overview (Lessons 1-5)
    - c. <u>Co-Occurring Conditions Overview</u> (Lessons 1-2, 4-6)
  - 4. Complete <u>IAS-USA HIC 101: Fundamentals of HIV Medicine, Initiation of Antiretroviral Therapy, and Primary Care for People With HIV:</u> 2 hours
  - 5. Read the Adults with HIV Standard Nurse Protocols: 6 hours

#### Attachment B: Outline of Annual Standards and Training for Public Health Nurses

#### I. Core Competencies:

- a. Bloodborne Pathogen Training: 6 hours
  - i. Review Bloodborne Pathogen Occupational Exposure Policy
  - ii. Review Workplace Safety Guidelines and OSHA BBP Standards
    - 1. Complete Basics of the OSHA Bloodborne Pathogen Standard for the Healthcare Setting
    - 2. Complete <u>Basic Infection Prevention in the Ambulatory Care Setting: Personal Protective Equipment and Safe Surfaces</u>
  - iii. Review Occupational Post-Exposure Prophylaxis Guidelines
    - 1. Complete the National HIV Curriculum: Module 5, Lesson 3: Occupational Postexposure Prophylaxis
- b. Mandatory Reporting of Suspected Child Abuse: 4 hours
  - Review the <u>DPH Policy for Mandatory Reporting of Suspected Child Abuse</u> and <u>2020 Georgia</u> Codes.
  - ii. Complete Mandated Reporters: Critical Links in Protecting Children in Georgia
- c. HIPPA Training: 1 hour and 30 minutes
  - i. Review DPH Confidentiality of Personal Health Information and Compliance with HIPAA Policy
  - ii. Complete DPH HIPAA Training
- d. Human Trafficking Awareness Training: 0.5 hours
- e. Dispensing Medications: <u>340B University OnDemand</u> Trainings (Introduction to Program, Eligibility Overview, & Compliance Cornerstones): 1.25 hours
- f. Emergency Response Policies, Procedures and Protocols
  - i. Participate in an emergency drill in clinic.
  - ii. Maintain up-to-date BLS certification (every two years)

#### II. Required for PHNs Providing the following Service:

- a. Tuberculin Skin Test
  - i. Annual Peer Review
    - 1. Nurse must perform 1 TST placement and 1 TST reading under the supervision of the supervisor or peer each year.

b. Vision Screening (Form 3300): Effective July 2021, re-certification is not necessary unless there is a lapse of 3 years or more in providing vision screening services, there are changes to vision screening guidelines, or a new screening device or process is added.

#### **II. Training Required to Practice Under Protocols:**

- a. Immunization
  - i. Self-study: 8 hours
    - 1. Complete You Call the Shots trainings: <u>Vaccines for Children</u>, <u>Vaccine Storage and Handling</u>, and <u>Vaccine Administration</u>: 4 hours
    - 2. Review Recommended Immunization Schedule for children, adolescents, and adults: 2 hours
      - a. Attend a GIP review of the schedule update or view an on-demand webinar: <u>Current Issues in Immunization Webinar- Updates on the current Child/Adolescent and Adult Immunization Schedule</u>
    - 3. Review Georgia Requirements for School and Childcare Attendance (assessment guidance and updates will be communicated annually).
    - 4. Review any updates to <a href="CDC's COVID-19 Vaccine Training Modules">CDC's COVID-19 Vaccine Training Modules</a>, if applicable: 1.5 hours
    - 5. Review <u>Travel Vaccines: Training and Resources</u>, if applicable: 0.5 hours
  - ii. Peer Review:
    - The supervisor or peer must observe the nurse during an immunization encounter with an infant, child or adolescent, and adult) for at least the first two years of practice or as indicated thereafter.

#### b. Women's Health

- i. Self-study: 10.5 hours
  - 1. Review Standard Nurse Protocols for Women's Health: 6.5 hours
  - 2. Review Georgia Family Planning Services Manual: 1 hour
  - 3. Review BCCP Policy and Procedure Manual: 3 hours
  - 4. Participate in at least one training per year on Women's Health services by webinar, e-learning (archived webinars, online courses, self-paced learning modules), professional conferences, in-service programs, or training conducted by Medical Consultant or designated trainer.
- ii. Peer Review:
  - 1. The supervisor or peer must observe the nurse in performing a complete history, physical assessment, laboratory tests (as indicated), and contraceptive management for at least the first two years of practice or as indicated thereafter.

#### c. Sexually Transmitted Infections

- i. Self-study: 6 hours
  - 1. Review the Standard Nurse Protocols for Sexually Transmitted Infections: 6 hours
  - 2. Every 2 years participate in a webinar or training containing STD related content. For example: Georgia DPH/Southeast STI/HIV Update, <u>National STD Curriculum Modules</u>, Syphilis Case Management course, in-service programs or professional conferences.
- ii. Peer Review:
  - 1. The supervisor or peer must observe the nurse in performing a complete history, physical assessment, laboratory tests (as indicated), and management plan for at least the first two years of practice or as indicated thereafter.

#### d. Tuberculosis

NOTE: Required trainings for nurses involved in case investigation and management.

- i. Self-study: 11 hours
  - 1. Review Standard Nurse Protocols for Tuberculosis: 2 hours
  - 2. Review Georgia TB Program Policy and Procedure Manual: 6 hours
  - 3. Review Georgia TB Reference Guide: 3 hours
- ii. Peer Review:
  - Supervisor or peer must observe and review the nurse performing TB services such as initial &
    ongoing health assessment (to include TB screening), initial or monthly evaluation of LTBI and
    active TB cases, contact investigation, ordering and dispensing and/or administration of drugs,
    patient education/counseling and DOT or VDOT for at least the first two years of practice or as
    indicated thereafter.

#### e. Hypertension

- i. Self-study: 1.0 hours
  - 1. Review Standard Nurse Protocol Nurse Protocol for Primary Hypertension in Adults: 1 hour
- ii. Peer Review:
  - 1. The supervisor or peer must observe the nurse in performing a complete history, physical assessment, laboratory tests (as indicated), and management plan for at least the first two years of practice or as indicated thereafter.

#### f. <u>Diabetes</u>

i. Self-study: 1.0 hours

- 1. Review Standard Nurse Protocol for Diabetes Mellitus in Adults: 1 hour
- ii. Peer Review:
  - 1. The supervisor or peer must observe the nurse in performing a complete history, physical assessment, laboratory tests (as indicated), and management plan for at least the first two years of practice or as indicated thereafter.
- g. Child Health

NOTE: Required trainings for nurses performing well-check visits.

- i. Self-study: 7 hours
  - 1. Review Georgia Department of Public Health, Children's Health Programs and Services: 1 hour
  - 2. Review 2022 Child Health Nurse Protocols:1 hour
  - 3. Review the EPSDT Services Health Check Program Manual: 2.5 hours
  - 4. Participate in at least one Children's Health training: 2.5 hours
- ii. Peer Review
  - 1. The supervisor or peer shall observe the nurse's performance during a well-check visit, to include health assessment, work-up, and client counseling, with an infant, a child, and an adolescent for at least the first two years of practice or as indicated thereafter.
- h. Pre-exposure Prophylaxis (PrEP)
  - i. Self-study: 2 hours
    - 1. Review the Standard Nurse Protocol for PrEP Use in the Prevention of HIV: 2 hours
- i. Non-occupational Post-Exposure Prophylaxis (nPEP)
  - ii. Self-study: 2 hours
    - 1. Review the <u>Standard Nurse Protocol for nPEP Use in the Prevention of Sexually Transmitted Diseases and BloodBorne Pathogens</u>: 2 hours
- j. <u>HIV</u>

NOTE: Required trainings for nurses involved in HIV management.

- i. Self-study: 50 hours
  - 1. Review the Adults with HIV Standard Nurse Protocols: 6 hours
  - 2. Review the DHHS <u>Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents Living with HIV</u>: 2 hours

- 3. Review the DHHS <u>Guidelines for the Prevention and Treatment of Opportunistic Infections in</u>
  Adults and Adolescents with HIV: 2 hours
- 4. Annually obtain a minimum of 15 contact hours of HIV-related continuing education (self-study or didactic/classroom), including HIV-related medication updates. Suggested resources include:
  - a. AIDS Education and Training Center
  - b. National HIV Curriculum
  - c. International Antiviral Society-USA
  - d. Georgia DPH
- ii. Peer Review
  - 1. The supervisor or peer must observe the nurse in performing a complete history, physical assessment, laboratory tests (as indicated), and management plan for at least the first two years of practice or as indicated thereafter.

# ATTACHMENT C: PEER REVIEW TOOL FOR THE REGISTERED NURSE AND ADVANCED PRACTICE REGISTERED NURSE IN PUBLIC HEALTH

Peer feedback for (RN/APRN name):
Peer Reviewer Name:
Program for Review:
Review Date:

#### **DIRECTIONS**

- Peer Reviewer indicates "A, B, C, or D" as appropriate in the last column of each row
- Peer Reviewers should support their views with specific and objective comments
- Additional information for each section of the tool is available below.

#### **Review tool:**

- **A = Excellent performance**
- B = Meets the standard of care
- C = Needs improvement in a specific aspect of clinical skills or knowledge
- D = Does not meet the standard of care and needs an improvement plan

Α	В	С	D	Peer Reviewer should designate appropriate level below
Patient #:	ı	1		
Initial Interaction	on demonstrates	appropriate inte	erpersonal	
Ascertains He	alth History and	pertinent Family	History	
	sical Exams			

Performs Laboratory Assessment	
Assessment, Diagnosis, and Determines Management Plan	
Implements Management Plan	
Provides Appropriate, Patient-Centered Counseling and Education	
Documentation is appropriate	
Please provide your input regarding opportunities for pers	onal and/or professional growth:
Specific and objective comments:	
Signature of RN/APRN & date:	

#### ADDITIONAL INFORMATION FOR COMPLETING THE PEER REVIEW

#### **INITIAL INTERACTION**

- Cordially greets patient
- Introduces self and observer
- Is wearing a clearly visible I.D. badge
- Assesses reason for visit
- Determines chief complaint
- Ascertains description of symptoms

#### **OBTAINS HEALTH HISTORY**

- General medical health and family history
- Childhood and adult illnesses
- Psychosocial
- Injuries
- Hospitalizations and operations
- Allergies and medications
- Immunizations
- Social History
- Diet
- Sexual History
- Females: Reproductive history/contraception use/current pregnancy status

#### PERFORMS PHYSICAL EXAM

Based on chief complaint -could be a comprehensive physical exam or focused exam.

#### PERFORMS LABORATORY ASSESSMENT

- Orders medically necessary tests
- Orders appropriate screening tests
- Collects/labels specimens correctly
- Uses infection control precautions/procedures
- Uses microscope correctly
- Uses other equipment correctly

#### DETERMINES ASSESSMENT/DIAGNOSIS AND DEVELOPS TREATMENT PLAN

- Identifies specific problems
- Determines the correct assessment/diagnosis based on history and clinical findings
- Involves patient in developing treatment plan
- Develops treatment plan consistent with programmatic standards and nurse protocols

#### IMPLEMENTS TREATMENT PLAN

- Orders/dispenses medication with correct labeling and record-keeping
- Administers medication/immunization(s) consistent with programmatic standards and Nurse Protocols
- Consults with physicians/other health care providers as indicated per Nurse Protocol
- Makes appropriate referrals per Nurse Protocols
- Schedules follow-up visits as indicated per Nurse Protocols

#### PROVIDES APPROPRIATE PATIENT-CENTERED COUNSELING AND EDUCATION

- Informs patient of assessment/diagnosis
- Gives risk-reduction messages
- Gives medication and other treatment as indicated
- Provides other appropriate written materials
- Ascertains patient's understanding of information provided
- Invites questions from patient
- Uses simple terminology to give appropriate answers

#### **DEMONSTRATES APPROPRIATE INTERPERSONAL SKILLS**

Reviewer should comment on the clinician's interpersonal skills demonstrated during any part(s) of the interaction with patient.

#### PRODUCES APPROPRIATE DOCUMENTATION:

Medical record is thoroughly completed

- Writing is legible
- Medical record is signed
- Signed consent forms are included with record Utilizes standard abbreviations, acronyms, symbols and dosage

#### **EVALUATION OF THE PEER REVIEW PROCESS BY THE RN/APRN IN PUBLIC HEALTH**

Date:	Name of Peer Reviewer:	
Name of RN/APRN Reviewed: _		

Instructions: This is a tool for evaluating the peer reviewer and process. Please rate the characteristics of your peer reviewer using the Likert Scale and questions below.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Objective and Fair	1	2	3	4	5
2. Resourceful/knowledgeable	1	2	3	4	5
3. Communicated effectively	1	2	3	4	5
4. Supportive	1	2	3	4	5
5. Respectful	1	2	3	4	5
6. Listened to my comments/concerns	1	2	3	4	5
7. Patient	1	2	3	4	5
Demonstrated understanding of the clinician role	1	2	3	4	5

Did you receive information from the peer review about your performance that you found helpful? \_\_\_ Yes \_\_\_ No

Department of Public Health Nurse Train Policy and Procedure Manual for Public Health Nurse Train 2	
id the peer reviewer suggest resources to you that will aid in improving your job performance? Yes No	
hat aspects of the peer review do you feel will benefit your job performance?	
ease make any suggestions for improvement in the evaluation approach of the peer reviewer	