Community Nursing: Health Care Behind Closed Doors

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Jefferson Nursing Students Go to Prison

Why Prison?

• It is a community with diversity in culture, gender, race, language, religious practice, age, educational and socio-economic backgrounds
• Students learn to provide care to people with diseases resulting from high risk lifestyles, drugs & alcohol, poor living conditions, & lack of access to medical care (90% of inmates have a diagnosable mental illness, substance abuse problem, or often both)
• Students are challenged to deliver compassionate & quality care within a custodial setting while maintaining a secure and safe environment for all
• Students learn to see past the “crimes” and treat the person
• The nurses’ role in improving health behavior & mental health have a significant impact on preventing recidivism which directly affects the community, inmates, their friends, & families.

Introduction

Focus of nursing education in the 21st century is to teach students how to work with individuals & families within a community setting & to develop skills in providing nursing care that stresses community as the client.
• The expectation of the APHA is that BSN students will be educationally prepared to work with & improve the health of individuals, families, & diverse populations within the community.

Pilot Program

• 6 FACT students (4 females, 2 males) & 2 nursing faculty, one clinical rotation, in 2003
• FBI criminal background checks & an 8 hour orientation by DOC
• Students traveled over 55 miles, no cell phones, beepers, equipment, money, lunch, pens, wallets or purses-only drivers license
• 65 students (waiting list), 8 clinical rotations, 2 faculty (with unrestricted compound access), since 2005

South Woods State Prison

• Opened spring, 1997 in Bridgeton, NJ
• Known as the premier medical facility for all NJ prisons
• 4000 all male medium security—now a maximum security prison
• A community within a community

Summary

• 100% reciprocal satisfaction with clinical experience—students, prison, and inmates
• Improved therapeutic communication skills & clinical skills esp. patient teaching & wound care
• Appreciation of community & their role in health & wellness promotion & maintenance
• In 2009, students & faculty instrumental in implementing the first disaster management & preparedness drills inside prison compound
• Prison has re-evaluated/updated policies and procedures related to documentation, wound care, patient care, and security based on student input

Evaluation Methods

• Daily post-conference meetings with prison administration
• Weekly clinical logs related to course objectives and correctional health
• Presentation of evidence-based practice health topics specific to the prison community
• Public poster presentations at TJU last day of community course
• Written clinical site evaluations
• Face to face evaluations with prison administrators