# windshield survey

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## What Is A Windshield Survey

Windshield Survey definition is that Windshield surveys are systematic observations made from a moving vehicle. Windshield surveys can help you better understand either the community in general or a specific condition or aspect of it. Windshield surveys are instrumental when the area you want to observe is large, and the aspects you are interested in can be seen from the road.

## Windshield Survey Nursing

In nursing, a windshield survey can be used to assess general community needs (conduct a community assessment) – to estimate the poverty level, for example – or to examine more specific facets of the community’s physical, social, or economic character. Some possibilities include determining the age, nature, and condition of the community’s available housing or Infrastructure needs – roads, bridges, streetlights, etc. as well as The presence or absence of functioning businesses and industrial facilities

## Windshield Survey Community Assessment

Community is important to the health of an individual. By assessing a community and being able to recognize its strengths and weaknesses, the community nurse is able to help develop a plan to improve the overall health of the community. A windshield survey is one way to begin to assess the community and its needs. In the following, this nurse will discuss what a community is, how it is important to health, how the community can work with the public health nurse, and how all of this can tie into the new Healthy People 2020 initiative. A complete windshield survey of the Village of Kingsley will be given as an example of s the public health nurse can go about improving the total health of a community.

Windshield Survey A Community Assessment Strategy   
What to include in a community assessment strategy

Conduct your own Windshield Survey. Be sure to include the following components:

* The age, nature, and condition of the community’s available housing
* Infrastructure needs
* Roads, bridges, streetlights, etc.
* The presence or absence of functioning businesses and industrial facilities
* The location, condition, and use of public spaces
* The amount of activity on the streets at various times of the day, week, or year
* The noise level in various parts of the community
* The amount and movement of traffic at various times of day
* The location and condition of public buildings
* The city or town hall, courthouse, etc.
* Walkability of community
* Are there walking paths/biking paths/safety?
* What is the proximity for walkability to community resources?
* Availability of public transportation
* It’s cost?
* It’s accessibility?
* Availability of community centers and public spaces, such as social service centers, public libraries, parks, churches, community centers, recreation centers
* Availability of health care facilities and resources, such as clinics and hospitals
* How many are there?
* Food options available and presence of nutrition
* Does the area have characteristics of food deserts?
* Are there grocery stores?
* The presence of homelessness
* Is there a homeless population?
* Are there homeless services?
* Police/Fire presence
* Schools in the area
* What is the location and physical condition of the schools?

### As you compile your Windshield Survey data, be sure to include:

• Data overview of all community components as identified in the Community Tool Box Resource

• Strengths of community as evidenced by Windshield Survey

• Weaknesses (gaps in service) as evidenced by Windshield Survey

• 1 problem based on the identified gap in community resources as an indicator of potential poor health outcomes

* Compile all your information into the Windshield Survey Template and complete the Data Summary questions at the end. (A Table is provided in the template, but you can create your own table in the document to display your information.)

## Example Of A Windshield Survey Of A Community

### windshield survey essay

Windshield Survey of the Village of Kingsley

Public health or community nurses are very important to communities and community health. Aspects of a community are important to the community’s health and should be addressed. To begin assessing a community to find its personalized healthcare needs and goals, it is helpful to do a windshield survey. The following will include a windshield survey of the Village of Kingsley. It will highlight important areas of health that the community could work to improve and discuss the importance of a health indicator from Healthy People 2020.

**Community**

Community can be defined in many ways and often differs from person to person. MacQueem et. al. (2001) researched what community meant and found a definition that most people in their study agree upon. Their definition is "a group of people with diverse characteristics who are linked by social ties, share common perspectives, and engage in joint action in geographical locations or settings" (MacQueem et. al., 2001, p. 1929). Within this definition there are five elements to help define community; locus (sense of place), sharing (common ideas and interests), joint action (cohesion and identity), social ties (relationships), and diversity (different interactions) (MacQueem, 2001). A community has a shared sense of togetherness and belonging. Members can rely on each other, use individual strengths, work together and thus make a stronger whole.

**Community Health**

When looking at community health one must first look back to the definition of community. People work together to form a community. Therefore, the health of the community relies on all members of that community. It looks at the bigger picture of health, not on the individual level, but on the group level. Community health relies on how well the community works together. For instance, if all members of the community receive their vaccinations, certain diseases will be prevented. By relying on the strengths of the community, the bigger picture can be seen and community health can improve (MacQueem, 2001).

**Community as Client**

While community health nurses work to improve the health of communities, they must first take into account the dynamics and resources of the community. The community is essentially the nurse’s client and therefore needs to be a part of the team in which decisions are made and a plan is put into place. All parties must be respected and the nurse needs to make use of all resources and strengths the community already has in place. When putting together a health plan it is important to involve the client at equal levels, which in this case is an entire community structure (Harkness & DeMarco, 2012).

**Healthy People 2020 Leading Health Indicator**

One very important health indicator from Healthy People 2020 is nutritional status, physical activity and obesity. One goal for this section is to increase the expanse of adults who accomplish the recommended amount of aerobic activity and muscle strengthening activity. The goal for 2020 is for 20% of adults to meet the goal set. Community health nurses can help with this goal by being a role model. Nurses can participate in activities in the community, volunteer at exercise events, and host programs to increase activity in the community (U.S. Department of Health and Human Services, 2013).

**Health Risks for the Village of Kingsley**

Four main health risks were determined after completing the windshield survey of the community of Kingsley (Appendix A). The first risk the community needs to realize is the transportation to health facilities. Most doctor offices are in a town which is twenty miles away. This is also where the nearest hospital is located. The second risk is the percentage of the population living in poverty or in the lower class of society. Many individuals and families in Kingsley have little means to provide healthcare and dental care for themselves and their families. This will increase the risk of chronic health conditions, poor nutritional status, and overall poor health. The third risk is the rate of obesity. Although this nurse has not seen any statistics on the Village of Kingsley, there were many overweight and obese individuals seen in the community while doing the windshield survey. Obesity increases the risk of numerous other chronic conditions, healthcare problems and costs. Finally, the fourth risk is the lack of nearby emergency services. There is no police station or hospital within twenty miles of the Village. This poses a vast risk for emergency situations, specifically. Although there is a volunteer fire department and ambulance, it often will take a lengthy period of time to get emergency vehicles out to houses in need. These are all areas the community nurse and community could make a health plan for and focus on for future health improvements.

**Conclusion**

Individuals often identify themselves as being a part of a community. The Village of Kingsley has a respectable sense of community. Individuals value the community and everyone works together to keep the community clean, safe, and a place where people would like to live. The school system is outstanding, many resources are nearby, people are involved in organizations, and the community has a sense of pride. These things help with the general health of the community, which is doing well. Overall, there are some areas the community can work on with relation to health. Even though the Village of Kingsley is on the right path, the community health nurse can help adapt a plan for these areas.

References

Grand Traverse County. (2014). GIS interactive mapping. Retrieved from: http://gis.co.grand-traverse.mi.us/gis/

Harkness, G.A., & DeMarco, R.F. (2012). Community and public health nursing practice: Evidence for practice. Philadelphia, PA: Wolters Kluwer/Lippincott.

MacQueem, K.M., McLellan, E., Metzger, D.S., Kegeles, S., Strauss, R.P., Scotti, R., Blanchard, L., & Trotter, R.T. (2001). What is community? An evidence-based definition for participatory public health. American Journal of Public Health. 91(12): 1929–1938.

U.S. Department of Health and Human Services. (2013). Healthy people 2020: Leading health indicators. Retrieved from: http://www.healthypeople.gov/2020/LHI/infographicGallery.aspx

Appendix A

### Windshield Survey Tool

|  |  |  |
| --- | --- | --- |
| **Housing and zoning**  The neighborhood consists of 60-100 year old, wood built, ranch style, detached, single family houses. There is space in the front and back of the houses. Houses are in good condition, well kept on the east side while some houses are in disrepair on the west side. Modern plumbing is in place with city water and sanitary systems. Natural gas is available for heat and most homes do not have air conditioning. | **Transportation**  Most people in the neighborhood walk, ride bikes or drive cars and trucks. There is a sidewalk that lines the main street. A major highway moves through the center of the village. Many residents work in a bigger nearby city and thus use cars and trucks to travel to work. Public buses are available twice a day when called ahead of time. It would be hard to live in this area without owning good transportation. | **Race and ethnicity**  The majority of the neighborhood is of the Caucasian race. An African American family runs the gym. A few families of Hispanic decent are in the neighborhood as well, but all speak English fluently. There are no other indices of ethnicity in the neighborhood. |
| **Open space**  There is a good amount of open space with three parks. Houses are about 1000-2000 square feet and sit on lots about 1/3 of an acre (Grand Traverse County, 2014). Lawns are green and manicured. Many plants and flowers line streets and yards. There are trees in the green center of the street and many shrubs and lighting lining the main street. The open space is public and used by many families in the neighborhood and individuals in the outskirts of the village as well. | **Service centers**  There are three parks, mostly utilized in the summer. One has a playground and splash pad. Another is used for softball, soccer and other outdoor sports. One park has many children sledding. Schools are very busy, with school of choice the elementary school is at capacity. There is one health clinic and a pharmacy within the village limits. The village also has a gym, a youth center, a youth clinic, and a library which are frequented often. | **Religion and Politics**  The residents are mostly Christian denomination. There is a Baptist and Methodist church within the village. Some residents travel 5 miles outside of the village to a Catholic church. The churches are very involved in the community. They have events, youth groups, food pantries, and are in use much more than just Sunday mornings.  There is mixed party affiliation in the village. There are some political signs as election days approach. |
| **Boundaries**  Kingsley is a small village with residential housing and businesses. There are signs displayed when entering the village from the north, east and west. It is surrounded by wooded land and farmland. | **Stores and Street People**  There is a grocery store about a quarter mile from the center of the village and a dollar store about a half mile. There are also two thrift stores and a pharmacy in the center of the village. Most people drive to the grocery store, but you also see many people walking.  Mothers and kids are seen walking the streets, along with some elderly individuals and workers as you approach the center of the village which has more commercial buildings. There are dogs tied up or behind fences. No stray animals are seen. Wildlife such as turkeys and squirrels are visitors as well. | **Health and Morbidity**  There are some obese individuals in the community along with many elderly individuals. There is one blind individual who often walks down the sidewalks and streets. There are no signs of addiction, communicable diseases, or mental illness while driving through the village. The nearest hospital is twenty miles from the center of the village. There is a health clinic, youth health clinic, and dentist office within the village. |
| **Commons**  There are three parks that are utilized more so in the summer months. “The Rock” is a youth center within walking distance of the school which is a neighborhood hangout for preteens and teens. The library and Subway are also popular hangouts. These areas will welcome strangers or the regular visitors. | **Signs of decay**  This neighborhood is on its way up. It has grown significantly in the past ten years. It is “alive” as it seems busy and clean. There is no trash, abandoned cars or houses, or houses beyond repair. There is an occasional real estate sign, but not many at the moment. Yes, there is mixed zoning usage, houses next to commercial properties. | **Media**  Most houses have cable or satellite entertainment. There are a few outdoor television antennas. The Record Eagle and Detroit Free Press are available to residents at the store and many have them delivered to their homes. There are a variety of magazines available in the store. Residents seem to rely mostly on television or the internet and cell phones for media coverage. |

## 

## Windshield Survey Template

### Data Overview

| Data | Strengths | Weaknesses |
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### Data Summary

**Please summarize your data by responding to the following:**

1. **Describe the strengths of community as evidenced by Windshield Survey.**
2. **Describe the weaknesses (gaps in service) as evidenced by Windshield Survey.**
3. **Identify 1 problem based on the identified gap in community resources as an indicator of potential poor health outcomes**

## Windshield Survey Nursing Paper Rubric

**Criteria Exceeds Meets Approaches Does not meet**

|  |  |  |  |
| --- | --- | --- | --- |
| **Data Overview of Community Tool Box Indicators**  **25%** of total grade    [**Align with goals**](javascript:void(0);) | **100%**  Data Overview fully developed including all data point indicators in the Community Tool Box resource. | **75%**  Data Overview partially developed including most data point indicators in the Community Tool Box resource. | **50%**  Data Overview partially developed including some data point indicators in the Community Tool Box resource.  **25%**  Data Overview including data point indicators in the Community Tool Box resource not presented. |
| **Strengths of Community**  **25%** of total grade  [**Align with goals**](javascript:void(0);) | **100%**  Analyzed strengths of the community as evidenced by integrating windshield survey and family assessment data. | **75%**  Explained strengths of the community as evidenced by outcome of Windshield Survey. | **50%**  Identified strengths of the community as evidenced by outcome of Windshield Survey. | **25%**  Did not include strengths of the community as evidenced by outcome of Windshield Survey. |
| **Weakness/Gaps in Health Service Indicators**  **25%** of total grade  [**Align with goals**](javascript:void(0);) | **100%**  Analyzed weaknesses of the community as evidenced by integrating windshield survey and family assessment data. | **75%**  Explained weaknesses or gaps in health service indicators of the community as evidenced by outcome of Windshield Survey. | **50%**  Identified weaknesses or gaps in health service indicators of the community as evidenced by outcome of Windshield Survey. | **25%**  Did not include weaknesses or gaps in health service indicators of the community as evidenced by outcome of Windshield Survey. |
| **Identification of a Problem**  **20%** of total grade  [**Align with goals**](javascript:void(0);) | **100%**  Developed a family problem based upon community risk factors for poor health outcomes, identified in Windshield Survey. | **75%**  Partially developed identification of a family problem based upon community risk factors for poor health outcomes, identified in Windshield Survey. | **50%**  Family problem identified is not in alignment with the community risk factors for poor health outcomes, identified in Windshield Survey. | **25%**  Did not identify a family problem. |
| **Quality of Written Communication/Use of APA Format/Style**  **5%** of total grade  [**Align with goals**](javascript:void(0);) | **100%**  APA format in compliance including reference and citations; Conventions, flow and organizational format were well-developed; No grammatical errors; Scholarly tone maintained throughout presentation. | **75%**  APA format in compliance including references and citations; Conventions, flow and organizational format were satisfactory; Few grammatical errors; Scholarly tone maintained throughout majority of presentation. | **50%**  APA format not in compliance including references/citations; Conventions, flow, content disorganized in presentation; Some grammatical errors; Scholarly tone not maintained throughout majority of presentation. | **25%**  APA format not in compliance including references/citations; Conventions, flow, content disorganized in presentation; Many grammatical errors; Scholarly tone not demonstrated in presentation. |

If I asked you what type of data would better describe your community to a person who is unfamiliar with it, what would you say? Another question I might ask is regarding what data would describe the social environment of your community. Do you see what I mean? If your family assessment finds that heart disease is a factor for one of the members, would you wonder what the rates of heart disease are for that county/state. Likewise, for diabetes, cancer, asthma, etc. Does their environment support a healthy lifestyle?

**Community Assessment – Remember to identify your community by name and location and address the three last questions.**

To attain the highest score, you must utilize the Community Toolbox, identify Healthy People 2020 Leading Health Indicators, and research related local or state statistical data applicable to your community. In Week 4, integration of the community assessment data with the family assessment data will enable you to determine a specific health related focus for the interviewed family and others for creation of the final overall Community Health Plan.

Relevant environmental statistics could include air quality markers, water quality, temperature extremes, rates of smoking, smog index, allergen indicators, wild fires, flooding, volcanic activity, toxic waste dumps, or any real or potential health exposures from any source.

At a minimum, your Reference page should list the following

City-Data.com (2020). http://www.city-data.com

Healthy People 2020. https://www.healthypeople.gov/2020/leading-health-indicators/2020-LHI-Topics

The comparison of numerical data statistics for morbidity, crime and unemployment would help in providing a clearer picture of the case study family’s challenges. For example, if you compare Zanesville data to Ohio and/or the nation. Here are some possible sources I found when I googled a few words. I hope this helps.

<http://www.city-data.com/crime/crime-Zanesville-Ohio.html>

<http://jfs.ohio.gov/ocomm/index.stm>

Relevant statistical data and environmental data

Ohio Dept. of Health Asthma rate: <https://www.odh.ohio.gov/odhprograms/chss/asthma/asthdata/data.aspx>

Ohio Public Health Data:

<https://www.odh.ohio.gov/healthstats/dataandstats.aspx>

**For this course, please focus on lack of community services other than hospitals and emergency departments.**

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## Windshield Survey Example Paper

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### Example 1

### Example 2

### Example 3

### Example 4