

MULTIPLE CHOICE

1. Which statement best describes *community-based nursing*?
- A practice in which care is provided for individuals and families.
 - Providing care with a focus on the group's needs.
 - Giving care with a focus on the aggregate's needs.
 - A value system in which all clients receive optimal care.

ANS: A

By definition, community-based nursing is a setting-specific practice in which care is provided for "sick" individuals and families where they live, work, and attend school. The emphasis is on acute and chronic care and the provision of comprehensive, coordinated, and continuous care. These nurses may be generalists or specialists in maternal–infant, pediatric, adult, or psychiatric mental health nursing. Community-based nursing emphasizes acute and chronic care to individuals and families, rather than focusing on groups, aggregates, or systems.

2. Which statement **best** describes the goal of *community-oriented nursing*?
- Providing care to individuals and families
 - Providing care to manage acute or chronic conditions
 - Giving direct care to ill individuals within their family setting
 - To preserve, protect, promote, or maintain health and prevent disease

ANS: D

By definition, community-oriented nursing has the goal of preserving, protecting, or maintaining health and preventing disease to promote the quality of life. All nurses may focus on individuals and families, give direct care to ill persons within their family setting, and help manage acute or chronic conditions. These definitions are not specific to community-oriented nursing.

3. Which of the following is the primary focus of public health nursing?
- Families and groups
 - Illness-oriented care
 - Individuals within the family unit
 - Health care of communities and populations

ANS: D

In public health nursing, the primary focus is on the health care of communities and populations rather than on individuals, groups, and families. The goal is to prevent disease and preserve, promote, restore, and protect health for the community and the population within it. Community-based nurses deal primarily with illness-oriented care of individuals and families across the life span. The aim is to manage acute and chronic health conditions in the community, and the focus of practice is on individual or family-centered illness care.

4. Which of the following is responsible for the dramatic increase in life expectancy during the 20th century?
- Technology increases in the field of medical laboratory research
 - Advances in surgical techniques and procedures
 - Sanitation and other population-based prevention programs
 - Use of antibiotics to fight infections

ANS: C

There has to be indisputable evidence collected over time that public health policies and programs were primarily responsible for increasing the average life span from 47 in 1900 to 78.6 years in 2017, an increase of approximately 60% in just over a century plus through improvements in (1) sanitation, (2) clean water supplies, (3) making workplaces safer, (4) improving food and drug safety, (5) immunizing children, and (6) improving nutrition, hygiene, and housing. Although people are excited when a new drug is discovered that cures a disease or when a new way to transplant organs is perfected, it is important to know about the significant gains in the health of populations that have come largely from public health accomplishments.

5. A nurse is developing a plan to decrease the number of premature deaths in the community. Which of the following interventions would most likely be implemented by the nurse?
- Provide free health care to all citizens
 - To increase the number of individuals with access to effective health care benefits
 - Lower the cost of health care to the American population
 - To lessen the governmental burden of providing health care to Americans

ANS: B

The central feature in the Patient Protection and Affordable Care Act (ACA) of 2010 are the mechanisms to increase the number of people with health insurance. The care provided is not necessarily free. While the cost of health care and the burden it places on the American government are serious concerns, they are not the primary focus of ACA.

6. What is the basic assumption stated by *Healthy People 2010* as it relates to public health efforts?
- Health disparities among any groups are morally and legally wrong.
 - Health care is the most important priority in government planning and funding.
 - The health of individuals cannot be separated from the health of the community.
 - The government is responsible for lengthening the life span of Americans.

ANS: C

The major premise of *Healthy People 2010* was that the health of the individual cannot be entirely separate from the health of the larger community. Public health practice focuses on the community as a whole, and the effect of the community's health status

(resources) on the health of individuals, families, and groups. The goal is to prevent disease and disability and promote and protect the health of the community as a whole. Public health can be described as what society collectively does to ensure that conditions exist in which people can be healthy. The basic assumptions of public health do not judge the morality of health disparities. The focus is on prevention of illness not on spending more on illness care. Additionally, individual responsibility for making healthy choices is the directive for lengthening life span not the role of the government.

7. Which of the following actions would most likely be performed by a public health nurse?
- Asking community leaders what interventions should be chosen
 - Assessing the community and deciding on appropriate interventions
 - Using data from the main health care institutions in the community to determine needed health services
 - Working with community groups to create policies to improve the environment

ANS: D

Although the public health nurse might engage in any of the tasks listed, he or she works primarily with members of the community to carry out core public health functions, including assessment of the population as a whole and engaging in promoting health and improving the environment. The interventions of asking community leaders which interventions should be chosen, assessing the community and deciding on appropriate interventions, and using data from health care institutions do not demonstrate the engagement of the community when making decisions about what the community actually wants and needs.

8. Which public health nurse most clearly fulfills the responsibilities of this role?
- The nurse who met with several groups to discuss community recreation issues
 - The nurse who spent the day attending meetings of various health agencies
 - The nurse who talked to several people about their particular health concerns
 - The nurse who watched the city council meeting on local cable television

ANS: B

Any of these descriptions might represent a nurse communicating, cooperating, or collaborating with community residents or groups about health concerns. A major challenge for the future is the need for public health nursing specialists to be more aggressive in working collaboratively with various groups in the community as well as professional colleagues in institutional settings to deal with barriers to health. However, the nurse who spent the day attending meetings of various health agencies is the most representative, because in public health, concerns are addressed from a broader perspective. In public health, broad concerns of the community should be addressed. Concerns are broader than recreation, individual concerns are not as important as aggregate priorities, and watching television (a one-way form of communication) is less effective than interacting with others.

9. Which of the following best defines *aggregate*?
- A large group of persons
 - A collection of individuals and families
 - A collection of people who share one or more characteristics
 - Another name for demographic group

ANS: C

An aggregate is defined a collection of people who share one or more personal or environmental characteristics. Members of a community can be defined in terms of either geography (e.g., a county, a group of counties, or a state) or a special interest (e.g., children attending a particular school). These members make up a population. The term *population* may be used interchangeably with the term *aggregate*. A large group of persons, a collection of individuals and families, and another name for demographic group are not accurate definitions of the term aggregate.

10. Which question asked by a novice nurse would be the most reflective of an understanding of the role of a public health nurse? a.
- “Which groups are at the greatest risk for problems?”
 - “Which patients should I see first as I begin my day?”
 - “With which physicians will I be most closely collaborating?”
 - “With which nursing assistants will I partner the most?”

ANS: A

Asking which groups are at greatest risk reflects a community-oriented perspective. The incorrect responses reflect a focus on individuals rather than a community-oriented perspective.

11. Making sure that essential community-oriented health services are available defines which of the core public health functions? a.
- Policy development
 - Assessment
 - Assurance
 - Scientific knowledge-based care

ANS: C

Assurance includes making sure that essential community-oriented health services are available in the community. The definition does not fit the terms *assessment*, *policy development*. Scientific knowledge-based care is not a core function of public health. Assessment is systematic data collection on the population, monitoring the population’s health status, and making information available about the health of the community. Policy development refers to efforts to develop policies that support the health of the population, including using a scientific knowledge base to make policy decisions.

12. When talking to a women’s group at the senior citizens’ center, the nurse reminded them that the only way the center would be able to afford to provide transportation services for them would be for them to continue to write letters to their local city council representatives requesting funding for such a service. What was the nurse trying to accomplish through this action? a.
- Ensure that the women did not expect the nurse to solve their problem.
 - Demonstrate that the nurse understood the women’s concerns and needs.
 - Express empathy, support, and concern.

d. Help the women engage in political action.

ANS: D

Public health nurses engage themselves and others in policy development and encourage and assist persons to communicate their needs to those with the power to take action. The nurse is demonstrating the role of advocate through this action, it goes beyond merely understanding the women's concern, and instead mobilizes them to take action. This action does not demonstrate the nurse showing empathy rather the nurse is empowering these women.

13. The public health nurse has a clear vision of what needs to be done and where to begin to improve the health of the community. Why would the nurse spend time meeting with community groups to discuss the most important task to be addressed first? a. To increase the group's self-esteem
- b. To maintain communication links with the groups
- c. To make the groups feel good about their contribution
- d. To work with the groups, not for the groups

ANS: D

Historically, health care providers have been accused of providing care *for* or *to* people without actually involving the recipients in the decisions. Public health nursing is a "with the people"—not a "to the people" or "for the people"—approach to planning. There is an imperative to work with members of the community to carry out core public health functions. The purpose of meeting with community groups is not to increase their self-esteem or make them feel good about their contribution, rather it is to allow them to act for themselves to solve the problems they are facing. The first task of working with the group should occur before addressing maintaining communication links.

14. The nurse often has to make resource allocation decisions. Which of the following best describes the criterion the nurse should use in such cases?
- a. The specific moral or ethical principle related to the situation
- b. The cheapest, most economical approach
- c. The most rational probable outcome
- d. The needs of the aggregate rather than a few individuals

ANS: D

The dominant needs of the population outweigh the expressed needs of one or a few people. All of the choices represent components of a decision that the nurse might consider in determining the needs of the aggregate.

15. Which of the following actions best represents public health nursing?
- a. Assessing the effectiveness of the high school health clinic
- b. Caring for clients in their home following their outpatient surgeries
- c. Providing care to children and their families at the school clinic
- d. Administering follow-up care for pediatric clients at an outpatient clinic

ANS: A

A public health or population-focused approach would look at the entire group of children being served to determine whether available services are effective in achieving the goal of improving the health of the school population. Caring for clients and their families focuses on individuals and families and not on the entire population. Public health focuses on care of populations.

16. Two nurses plan to walk under a huge downtown bridge where various homeless persons live. Why would the nurses go to such an unsafe area?
- a. To assess the needs of the homeless who live there
- b. To demonstrate their courage and commitment
- c. To distribute some of their own surplus clothes to those who can use them
- d. To share with various churches and other charities what is needed

ANS: A

In most nursing practices, the client seeks out and requests assistance. In public health nursing, the nurse often reaches out to those who might benefit from a service or intervention, beginning with assessment of needs. The other answers reflect responses where the nurse is trying to give assistance to this population that may or may not be helpful or welcomed.

MULTIPLE RESPONSE

1. Which of the following variables have led to a stronger commitment to population-focused services? (*Select all that apply.*) a. Economic turmoil and demand for high-technology care
- b. Emergence of new or drug-resistant infectious diseases
- c. Emphasis on overall health care needs rather than only on acute care treatment
- d. Threat of bioterrorism

ANS: B, C, D

As overall health needs become the focus of care in the United States, a stronger commitment to population-focused services is emerging. Threats of bioterrorism, anthrax scares, and the emergence of modern-day epidemics have drawn attention to population-focused safety and services. Economic turmoil and demand for high-technology care have not contributed to a stronger commitment to population-focused services, rather it has occurred as overall health needs have become the focus of care.

2. Which of the following actions demonstrate effective public health nursing practice in the community? (*Select all that apply.*)
- a. Epidemiologic investigations examine the environment for health hazards.
- b. New services are organized where particular vulnerable populations live.
- c. Partnerships are established with community coalitions.
- d. Staff members at the public health agency continue to increase in number.
- e. Staffing walk in clinics for low income families

ANS: A, B, C

Evidence that public health nurses are practicing effectively in the community would include organizing services where people live, work, play, and learn; working in partnerships and with coalitions; and participating in epidemiologic studies. Neither increasing the number of staff nor acting as staff in the delivery of acute and/or chronic care has a relationship to the effectiveness of public health nursing practice.

3. Why are nurses increasingly providing care in clients' homes rather than in hospitals? (*Select all that apply.*)
- a. Home care is less expensive.
 - b. It is much more efficient to give care in the home.
 - c. Nurses prefer to give home care with individual attention.
 - d. People prefer to receive care in their homes rather than in hospitals.

ANS: A, D

An increasing number of clients are receiving care in the home because it is less expensive and clients prefer to receive care in familiar and comfortable settings. It is not more efficient nor more convenient, since travel time has to be considered. Nurses differ as to their preferred employment setting.

MULTIPLE CHOICE

1. A nurse is considering applying for a position as a public health nurse. Which of the following would be a reason this position would be appealing?
- Its autonomy and independence
 - Its focus on acute care and immediately visible outcomes
 - Its collaboration with other health care professionals
 - Its flexibility and higher wages

ANS: A

Public health nursing is known for its autonomy and independence. In many instances, there are limited other health care professionals and staff with whom to interact. In-patient acute care nurses focus on acute care with outcomes known fairly quickly. Acute care nurses collaborate frequently with other health care professionals. Depending on the position there may be more flexibility, but typically public health nurses do not receive higher wages.

2. The Elizabethan Poor Law of 1601 is similar to which current law?
- Welfare
 - Food stamps
 - Medicaid
 - Medicare

ANS: C

The Elizabethan Poor Law guaranteed medical care for poor, blind, and “lame” individuals. This minimal care was generally provided in almshouses supported by local government similar to Medicaid assistance. Welfare and food stamps do not provide for medical care. Medicare provides medical care to primarily the elderly population.

3. How did the Industrial Revolution result in previous caregiving approaches, such as care by families, friends, and neighbors, becoming inadequate?
- Economic and political wars resulted in frequent death and injuries.
 - Incredible plagues consistently and constantly swept the European continent.
 - Migration and urbanization resulted in increased demand for care.
 - Caregivers could easily find other employment, so they demanded to be paid.

ANS: C

Care became inadequate because of the social changes in Europe, with great advances in transportation, communication, and other technologies. The increased mobility led to migration and urbanization, which in turn led to increased need for care. The Industrial Revolution was a time of great advances in technology, transportation, and communication, not a time of economic and political unrest or a time where incredible plagues occurred in Europe. Caregivers during this time period were typically poorly educated and untrained, so there was not an issue related to wages or employment.

4. A colonist is working in the public health sector in early colonial America. Which of the following activities would have likely been completed?
- Establishing schools of nursing
 - Developing vaccines to administer to large numbers of people
 - Collecting vital statistics and improving sanitation
 - Developing public housing and almshouses

ANS: C

Collecting vital statistics and improving sanitation are examples of activities from the early colonial America. Establishing schools of nursing, developing vaccines to administer to large numbers of people, and developing public housing and almshouses all happened after the colonial period.

5. Why did American citizens become interested in establishing government-sponsored boards of health?
- They were afraid of infectious diseases such as yellow fever.
 - The government could force the poverty-stricken to accept care.
 - Such boards could tax and thereby ensure adequate funds to pay for care.
 - Such a system would allow for accurate records of births and deaths.

ANS: A

Threat of disease, especially yellow fever, led to public interest in establishing government-sponsored, or official, boards of health. The threat of disease was the impetus for creation of the boards of establishing boards of health. The primary interest of the boards of health was to provide public health services for the entire population and not only those who were poverty-stricken. The primary purpose of the boards of health was not to collect accurate vital statistics or receive tax dollars rather its purpose was to ensure the health of the population.

6. A nurse was employed by the Marine Hospital Service in 1800. Which of the following interventions would the nurse most likely have implemented?
- Setting policy on quarantine legislation for immigrants
 - Establishing hospital-based programs to care for the sick at home
 - Identifying and improving environmental conditions
 - Providing health care for merchant seamen

ANS: D

Providing health care to seamen was an early effort by the federal government to improve public health. The purpose of the Marine Hospital Service was to secure its maritime trade and seacoast cities. Quarantine legislation was enacted by legislation during this time period, but the nurse would not have been responsible for setting these policies. Nursing care for clients in the home began in

the first half of the 1800s through a variety of agencies including the Ladies' Benevolent Society of Charleston South Carolina. Identifying and improving environmental conditions was a focus of the public boards of health, not necessarily specifically a role of the nurse.

7. What was the outcome of the Shattuck Report?
- Efforts to control alcohol and drug abuse, as well as tobacco use, were initiated.
 - Environmental sanitation efforts became an immediate priority.
 - Guidelines for modern public health organizations were eventually developed.
 - Local and state governments established boards of health after its publication.

ANS: C

It took 19 years for the first of Shattuck's recommendations to be implemented, but his report was the first effort to create a modern public health organization. This report called for broad changes to improve the public's health to take place; however, these changes did not happen immediately after publication. They took 19 years to be implemented in the first state of Massachusetts. The report included establishment of a state health department and local health boards in every town, sanitary surveys, and food, drug, and communicable disease control, but none of these changes happened quickly.

8. Which nurse is famous for creating public health nursing in the United States?
- Florence Nightingale
 - Frances Root
 - Lillian Wald
 - Mrs. Solomon Loeb

ANS: C

Lillian Wald established the Henry Street Settlement and later emerged as the established leader of public health nursing during its early decades. Mrs. Solomon Loeb was a wealthy layperson who assisted Mary Brewster in the establishment of the Henry Street Nurses Settlement. Francis Root was the first trained nurse in the United States who was salaried as a visiting nurse. Florence Nightingale had many accomplishments, but none of these occurred in the United States.

9. Which of the following would have been the focus of a school nurse in the early 20th century?
- Investigating causes of absenteeism
 - Teaching school as well as being a nurse
 - Promoting nursing as an autonomous practice
 - Providing medical treatment to enable children to return to school

ANS: A

Early school nursing focused on investigating causes of absenteeism. Providing medical treatment was the responsibility of physicians. School nurses did not teach in the schools nor were they part of an autonomous practice during this time period.

10. A nurse is reviewing the original work of the National Organization for Public Health Nursing. Which accomplishments of today were started within this organization?
- Requiring that public health nurses have a baccalaureate degree in nursing
 - Standardizing public health nursing education
 - Developing public health nursing competencies
 - Opening the Henry Street Settlement

ANS: B

The National Organization for Public Health Nursing sought to improve the educational and services standards of public health nursing. The Henry Street Settlement was already in existence and was opened by Lillian Wald and Mary Brewster. The baccalaureate degree in nursing was not developed yet. Public health nursing competencies were developed by the Quad Council.

11. Why were nurses so unprepared for public health nursing in the early 20th century?
- Public health nursing had not yet been created as a field.
 - No one would teach the nurses how to engage in public health activities.
 - Nightingale's textbook did not include content on public health nursing.
 - Nurses were educated in diploma schools, which emphasized care of hospital clients.

ANS: D

Nursing school courses taught in diploma schools of nursing emphasized hospital care of patients; thus, nurses were unprepared for home visiting. The specialty of public health nursing practice was developed in the early 1800s. There was not a lack of teachers for this activity, rather the focus of nursing care was in the acute care setting and not in the community. Nightingale did not have a published textbook.

12. A nurse is considering joining the American Public Health Association (APHA). What information about this organization should be considered when making this decision?
- APHA focuses on the public health concerns of the medical profession.
 - APHA represents concerns of nursing specialty practices.
 - APHA provides a national forum for nurses to discuss their public health concerns.
 - APHA focuses on providing health promotion education to the public.

ANS: C

APHA was formed to facilitate interprofessional efforts and promote the "practical application of public hygiene." The Public Health Nursing Section within APHA provides nurses with a national forum to discuss their concerns and strategies within the larger context of the major public health organization. It also serves as a focus of leadership and policy development for community/public health nursing. The focus of public health concerns of the APHA is broader than only the medical profession. The APHA focuses on concerns of public health nurses, not all nursing specialty practice. The APHA focuses on practical application of public hygiene, which is broader than only health promotion education.

13. Why did the Metropolitan Life Insurance Company establish and retain for several years the first community nursing health program for policyholders?
- Creating such a service was the morally correct thing to do
 - Employing nurses directly was less expensive than paying taxes to the city for the same purpose
 - Having the company's nurses make home visits increased worker morale
 - Public health nurses visits led to fewer policyholder deaths and lowers company costs

ANS: D

Metropolitan Life saw an average decline of 7% in the mortality rate of policyholders and almost a 20% decline in the deaths of children under the age of 3 years. The insurance company attributed this improvement and the associated reduced costs to the work of visiting nurses. There was limited funding in the early 20th century to extending nursing services in the community; thus, home visiting was a very expensive service to provide. Although Metropolitan Life Insurance Company may have increased worker morale that was not the primary reason for continuation of the program.

14. Which client would have been most likely to receive care from the Frontier Nursing Service? a. An injured soldier
- A homebound, elderly male
 - A woman in labor
 - A child with a broken femur

ANS: C

The Frontier Nursing Service nurses were trained in nursing, public health, and midwifery and provided care to rural and inaccessible areas, which led to reduced mortality. Care for soldiers, elderly, and children was not the focus of the care provided by the Frontier Nursing Service.

15. A public health nurse is determining what type of programming should be developed for the community. Which of the following is the most crucial factor that will influence program development?
- Comprehensive assessment and planning done in the community
 - Documented needs of the local community
 - Federal funding for priority diseases or groups
 - Nursing staff's expertise and skills

ANS: C

Programs are designed to fit funding priorities; thus, the areas supported by Congress determine the categories in which most effort is focused locally. A need in the community may be identified through community assessment, planning, and looking at needs in the community; however, without funding there will not be a way to create necessary programming. The expertise of the staff should not be the determining factor when deciding on programming in the community.

16. A nursing student during World War II would likely join which group?
- The US Public Health Service
 - The Marine Nurse Corps
 - The Frontier Nursing Service
 - The Cadet Nurse Corps

ANS: D

The *Bolton Act* of 1943 established the Cadet Nurse Corps during World War II, which increased enrollment in schools of nursing at undergraduate and graduate levels. The U.S. Public Health Service began to use nurses during World War I to establish a public health nursing program for military outposts. The Marine Hospital Service was established well before World War II in 1798. The Frontier Nursing Service was established by Mary Breckinridge in 1925 and provided health care to the rural and often inaccessible populations in the Appalachian region of southeastern Kentucky.

17. A public health nurse is compiling information about how to promote early detection of breast cancer in women. Which document would most likely provide useful information about this topic? a. *The Future of Public Health*
- Healthy People 2020*
 - Patient Protection and Affordable Care Act*
 - Scope and Standards of Public Health Nursing Practice*

ANS: B

The *Healthy People 2020* documents propose a national strategy to significantly improve the health of Americans by preventing or delaying the onset of major chronic illnesses, injuries, and infectious diseases. The disarray resulting from reduced political support, financing, and effectiveness is described in *The Future of Public Health*. The *Scope and Standards of Public Health Nursing Practice* describes the processes of assessment, analysis, and planning that are carried out by the public health nurse. The Patient Protection and Affordable Care Act improved access to health insurance for Americans.

18. A public health nurse is involved in health care reform. Which of the following best explains why the nurse is involved in these efforts?
- To promote the nursing profession
 - To increase funding for public health nursing
 - To address the concerns of nurses
 - To help improve health care access

ANS: D

Public health nurses have been involved in health care reform for several years. An emphasis of reform is that health promotion and disease prevention appear to yield reduction in costs and illness/injury incidence while increasing years of healthy life. Health care reform has a larger scope than only the profession of nursing and public health nursing. It addresses the concerns of nurses as well as many other health care professions.

MULTIPLE RESPONSE

1. How did Florence Nightingale help bring about community health nursing? (Select all that apply.)
- She convinced socially prominent wealthy women to volunteer to give care.

- b. She focused on all soldiers and their environment.
- c. She interacted with each individual person, assessing his or her needs and acting to meet those needs.
- d. She kept careful records on what was done and what were the results.

ANS: B, D

Nightingale progressively improved the soldiers' health using a population-based approach that improved both environmental conditions and nursing care. Using simple epidemiology measures, she documented a decreased mortality rate to demonstrate the outcomes. While Nightingale was part of a wealthy family, the role of nurses during this time period was typically fulfilled by poor women. The focus of Nightingale's care was to identify health care needs and interventions that influenced the health of the entire population, not individuals.

2. A nurse working with Mary Breckinridge would have likely assisted in what activity? (*Select all that apply.*) a. Establishing the Henry Street Settlement
- b. Developing health programs geared toward improving the health care of the rural populations
 - c. Blazing a nursing trail through the Rockies, providing nursing care to miners and their families
 - d. Ensuring positive outcomes for pregnancies among women in the Appalachian region

ANS: B, D

Mary Breckinridge developed health programs geared toward improving the health care of the rural and often inaccessible populations in the Appalachian regions of the Southern Kentucky. Breckinridge introduced the first nurse-midwives into the United States when she deployed FNS nurses trained in nursing, public health, and midwifery. Their efforts led to reduced pregnancy complications and maternal mortality, and to one-third fewer stillbirths and infant deaths in an area of 700 square miles. Lillian Wald established the Henry Street Settlement. Mary Breckinridge developed health programs geared toward improving the health care of the rural and often inaccessible populations in the Appalachian regions of southern Kentucky, not the Rockies.

3. How did nursing education change in the 1950s? (*Select all that apply.*)
- a. Baccalaureate nursing programs typically included public health nursing concepts.
 - b. Diploma schools of nursing continued to expand their student numbers.
 - c. Junior and community colleges began offering nursing programs.
 - d. Nurses were strongly encouraged to have a scientific basis for their practice.
 - e. Post diploma training was initiated nationwide.

ANS: A, C

In the 1950s, public health nursing became a required part of most baccalaureate nursing education programs. In 1952, nursing education programs began in junior and community colleges. Associate degree programs began to expand their enrollments, not diploma schools. The need for evidence-based practice continues to grow but was not a change in the 1950s. In 1914 Mary Adelaide Nutting, working with the Henry Street Settlement, began the first course for post-diploma school training in public health nursing at Teachers College in New York City.

4. How did health care and its delivery change during the 1980s? (*Select all that apply.*)
- a. Funding to public health increased as funding for acute hospital care decreased.
 - b. Laws began to be passed that discouraged the use of alcohol, drugs, and tobacco.
 - c. Nurse practitioners were increasingly used to provide care.
 - d. Public health programs suffered reduced political support, financing, and effectiveness.

ANS: B, C, D

During the 1980s funding began to shift to meet the costs of acute hospital care, medical procedures, and institutional long-term care. The use of health maintenance organizations was encouraged, and the use of nurse practitioners increased. Consumer and professional advocacy groups urged the passage of laws to prohibit unhealthy practices such as smoking and driving under the influence of alcohol. By the late 1980s, public health had declined in political support, financing, and effectiveness.

MULTIPLE CHOICE

1. A public health agency is planning to implement the electronic health record. (Which is a benefit of this choice?
 - a. Facilitation of interprofessional care
 - b. Improved client compliance with medical regimens
 - c. Cost savings to the agency
 - d. Compliance with JCAHO standards

ANS: A

The electronic medical record facilitates interprofessional care in chronic disease management and coordination of referrals; 24-hour availability of records with downloaded laboratory results and up-to-date assessments; incorporation of protocol reminders for prevention, screening, and management of chronic disease; improvement of quality measurement and monitoring; increased client safety; and decline in medication errors. There is no evidence that an electronic health record improves client compliance with medical regimens. Electronic health records can increase costs to an agency. JCAHO does not accredit public health agencies.

2. Which statement **best** describes the cost of health care in the United States?
 - a. Health care costs are kept low, and the indicators of health are among the best worldwide.
 - b. Health care costs are low which has resulted in poor health outcomes.
 - c. Health care costs are the highest in the world, but the indicators of health are not the best worldwide.
 - d. Health care costs and indicators of health are the highest in the world.

ANS: C

Health care costs in the United States are the highest in the world and comprise the greatest percentage of the gross domestic product, the indicators of what constitutes good health do not document that Americans are really getting their money's worth. Health care costs are not low in comparison to the rest of the world. The health outcomes in the United States are poor in comparison to other countries who spend less money on health care.

3. A nurse is explaining the health care system in the United States to a group of health care providers visiting from South America. How would the nurse best describe the current health care system?
 - a. "It is a logical, rational approach to meeting expressed needs while still trying to control costs."
 - b. "It is a centralized system that provides care in hospitals."
 - c. "It is divided primarily into two components: private health care and public health care."
 - d. "It is the best in the world with outstanding research and high-technology care available to all."

ANS: C

Health care in the United States consists of a private or personal care system and a public health system, with overlap between the two. The United States health care system is one of the most expensive systems in the world that does not do a good job at controlling costs. Care is provided through an enormous range of facilities and providers, including hospitals, physicians' and dentists' offices, nursing homes, mental health facilities, ambulatory care centers, and freestanding clinics. Although there is great research and high-technology care in the United States, the health care outcomes of the country do not reflect this. Health care disparities exist among multiple populations making this system not available to all.

4. Which statement best describes ideal primary health care?
 - a. Based on a multidisciplinary group of health care providers that work as a team
 - b. Essential care available to all community members, which encourages self-management
 - c. Focused on health promotion and disease prevention for everyone enrolled in the health center
 - d. Local efforts to meet the Declaration of Alma Ata principles

ANS: B

Primary health care is generally defined as essential care made universally accessible to individuals, families, and the community. Health care is made available to them with their full participation and is provided at a cost that the community and country can afford. Public health is described as organized and multidisciplinary efforts aimed at preventing disease and promoting health, not primary care. Primary care provides for the integration of health promotion, disease prevention, with curative and rehabilitative services. The Declaration of Alma Ata was aimed at a world-wide, not local goal, to attain a level of health that permitted all citizens of the world to live socially and economically productive lives.

5. How does managed care (MC) attempt to control costs of care?
 - a. By encouraging families to use the point of service list of individual practice associates
 - b. By requiring families to choose a care provider from the MC network and not allowing access to other services without their provider's permission
 - c. By moving Medicaid-eligible families onto state Medicare enrollment
 - d. By refusing permission for families to use urgent care or emergency department services

ANS: B

Managed care is a system in which care is delivered by a specific network of providers. Each provider serves as a gatekeeper who controls access to other providers and services. Cost is reduced because members cannot use specialists or seek hospital or other care without permission from their primary-care providers. Thus, those enrolled in Medicaid managed care have restrictions that help keep costs down for government (and for taxpayers). Managed care provides care through a specific network of providers who agree to comply with the care approaches established through a case management approach, not through a point of service list of individual practice associates. Medicaid and Medicare programs are not interchangeable, these programs serve different

populations. Managed care does not refuse permission for certain services such as urgent care or emergency department, rather a case management approach is used to control costs.

6. An 80-year-old woman comes to the community health care facility with a large bag of medications. She tells the nurse she can no longer afford these medications because her only income is Social Security. Which statement is the best response by the nurse? a. "Let's go through these medications and see which ones we can delete."
b. "You can get these medicines at this clinic for free."
c. "Let's see if we can get some help from Medicare to help you pay for these medications."
d. "These medications are important. Do your best to pay for them."

ANS: C

This elderly patient probably is eligible for benefits through Medicare Part D. Medicare Part D has been added to Medicare to help cover the cost of prescriptions. The role of the nurse would not be to delete medications for the patient or to tell the patient to figure it out on her own. Because of the age of the patient, the nurse should see if options exist under the Medicare system before looking into receiving the medications for free as there may be other barriers which limit the abilities to get these medications at a discounted cost.

7. A nurse is determining which health care services must be offered at a local public health clinic. Which factor is most important for the nurse to consider?
a. Data available from the most recent community assessment
b. Suggestions from community members about what is needed
c. Recommendations from *Healthy People 2020*
d. Services mandated by the state government

ANS: D

At the local level, health departments provide care that is mandated by state and federal regulations. Data available from the most recent community assessment, suggestions from community members about need, and recommendations from *Healthy People 2020* could all be used. However, funding for these types of programs may not be available. The services that are mandated by the state government will be funded and allow the clinic to be able to provide these services.

8. A public health nurse is working with a low-income population in Massachusetts. Which of the following assumptions can the nurse make about this population?
a. They have difficulty accessing health care due to a shortage of primary-care providers.
b. They most likely receive health insurance through Medicare.
c. They are unable to access health care due to the implementation of the Affordable Care Act.
d. They have access to affordable health care insurance.

ANS: D

Massachusetts began an experiment in health reform in 2006. Two years after health reform legislation became effective, only 2.6% were uninsured, the lowest percentage ever recorded in any state. The shortage of primary care providers is not significantly different in Massachusetts than in other areas of the country. Low-income populations are eligible for Medicaid services, not Medicare. The program in Massachusetts became a model for the Affordable Care Act.

9. A public health nurse is working with a client who does not have health insurance. Where will the nurse most likely direct the client to in order to receive care?
a. Managed care
b. Community health center
c. Emergency department
d. Physician office

ANS: B

There is a safety net for the uninsured or underinsured. These are the federally funded community health centers which provide a broad range of health and social services, using nurse practitioners and RNs, physician assistants, physicians, social workers, and dentists. Community health centers serve primarily in medically underserved areas which can be rural or urban as well as people of all ages, races, and ethnicities, with or without health insurance. Managed care is a system in which care is delivered by a specific network of providers who agree to comply with the care approach, not a place to refer a client without health insurance. Emergency departments and physician offices are not the best place for an individual without health insurance to receive care. Both are expensive and do not provide the necessary resources for the individual to possibly receive health insurance.

10. Which of the following best describes why local, state, and federal governmental agencies have started to cooperate and collaborate more closely in the last few years?
a. Increased administrative pressures to demonstrate outcomes
b. Increased focus on emergency preparedness and response
c. Increased taxpayers' complaints and general unhappiness
d. Increased pressure to decrease overlap in services

ANS: B

Since the tragedy of September 11, 2001, health departments have increasingly focused on emergency preparedness and response. In case of an emergency event, state and local health departments in the affected area will be expected to collect data and accurately report the situation, to respond appropriately to any type of emergency, and to ensure the safety of the residents of the immediate area, while protecting those just outside the danger zone. This goal—to enable public health agencies to anticipate, prepare for, recognize, and respond to terrorist threats or natural disasters—has required an unprecedented level of interstate and federal-local planning and cooperation among these agencies. Demonstrating outcomes and decreasing overlap of services are both important

factors to consider; however, this is not the reason why increased collaboration has occurred. There has not been an increase in taxpayer complaints or unhappiness that has caused these changes to occur.

11. Minority nurses represented about 30.1 percent of the RN population. What is this an example of? a. Projection
b. Disparity
c. Racism
d. A sentinel event

ANS: B

Disparities are racial or ethnic differences in the quality of health care or representation of a faction of the population, not based on access or clinical needs, preferences, or appropriateness of an intervention. Projection is an estimate or forecast of a future situation based on current trends. Racism is a prejudice that exists against someone of a different race based on the belief that one's own race is superior. A sentinel event is an unanticipated event in health care that results in death or serious injury to the patient.

MULTIPLE RESPONSE

1. A public health agency is in the process of obtaining accreditation. Which of the following best describes why the agency would want to achieve accreditation? (*Select all that apply.*) a. To improve health programming and services
b. To improve community relationships
c. To improve performance and quality
d. To improve management
e. To decrease cost of health care

ANS: B, C, D

The purpose of accreditation for public health departments is to assist and identify quality health department performance and quality, and it develops leadership, improve management, and improve community relationships. Neither the improvement of health care programming and services nor minimizing health care costs is a reason why a public health agency would want to achieve accreditation.

2. What do demographic figures suggest about the ways in which the population of the United States is changing? (*Select all that apply.*)
a. Foreign-born immigrant population is increasing.
b. Hispanics are the largest minority group population.
c. Leading causes of death are from infectious diseases.
d. Mortality for both genders in all age groups declined.
e. Unintentional injuries are among the top 10 causes of death.

ANS: A, B, D, E

The nation's foreign-born population is growing, and it is projected that from now until 2050 the largest population growth will be due to immigrants and their children. Although African Americans used to be the largest minority group, Hispanics now have that distinction. The population of the United States continues to increase, and mortality for both genders from all age groups has declined. The leading causes of death have changed from infectious diseases to chronic and degenerative diseases with unintentional injuries being among the top 10.

3. Which of the following statements is accurate descriptions of current social and economic trends in the United States? (*Select all that apply.*)
a. Citizens are appreciating the quality of life enjoyed in the United States.
b. Enjoying life is not as important as the need to take care of oneself.
c. People often spend a considerable amount of their own money on complementary therapies.
d. The gap between the richest and poorest is widening.
e. The composition of families and living patterns are changing.

ANS: A, C, D, E

Several social trends that influence health care include changing lifestyles, a growing appreciation of the quality of life, the changing composition of families and living patterns, changing household incomes, and a revised definition of quality health care. People often spend a considerable amount of their own money for these types of therapies because few are covered by insurance. It is obvious that the gap between the richest and poorest is widening because of the percent wage increase in the higher income levels. Americans spend considerable money on health care, nutrition, and fitness, because health is seen as an irreplaceable commodity. To be healthy, people must take care of themselves.

4. Which of the following provides evidence that the US health care system is in crisis? (*Select all that apply.*)
a. Health insurance is an expensive benefit for employers to provide.
b. Incompetent or negligent nurses are an ongoing source of medical errors.
c. Long work hours and provider fatigue are a major factor in medical errors.
d. More punitive measures must be taken to decrease provider errors.
e. Consumers want lower costs and high-quality health care without limits.

ANS: A, C, E

Consumers want lower costs and high-quality health care without limits and with an improved ability to choose providers and services of their choice while employers are typically the purchasers of health care; they want to be able to obtain basic health care plans at reasonable costs for their employees. Many employers have seen their profits diminish as they put more money into providing adequate health care coverage for employees. Nurses working long hours pose a serious threat to patient safety because fatigue slows reaction time, saps energy, and diminishes attention to detail. The Institute of Medicine's (IOM) report *To Err Is Human* recommends that we stop blaming and punishing individuals for errors and instead begin identifying and correcting system failures by designing safety into the process of care. The report makes it clear that the majority of medical errors today were not produced by provider negligence, lack of education, or lack of training.

5. A nurse is working at a state health department. Which of the following duties would most likely be completed in this setting?

(Select all that apply.)

- a. Administering the Medicaid program
- b. Assessing the health needs of the state's citizens
- c. Employing and supervising school health nurses
- d. Establishing and maintaining child immunization clinics
- e. Providing education regarding established health codes

ANS: A, B, E

State health departments try to prevent and respond to infectious disease outbreaks. They also are responsible for health care financing and administering Medicaid, providing mental health and professional education, establishing health codes, licensing facilities and personnel, and regulating the insurance industry. State health departments also give direct assistance to local health departments in areas such as ongoing assessment of health needs. Employing and supervising school health nurses occur at the local level, and many times within a specific school. Provision of child immunization clinics occurs at the local level.

MULTIPLE CHOICE

1. Which of the following best defines the word *politics*?
- The art of influencing others
 - The outcome of governmental policies
 - A provision of power for making decisions
 - The result of legislative action

ANS: A

Politics is the art of influencing others to accept a specific course of action. *Political action* results in governmental policies and legislation. The result of legislative action typically is done in the form of laws and policies. The provision of power for making decisions is typically assumed by the government.

2. Which of the following activities is completed by the executive branch of the federal government? a. Administration of policy
- Interpretation of policy
 - Proposal of policy
 - Passage of policy

ANS: A

The executive branch administers and regulates policy. The legislative branch proposes policy (as bills) and passes policy (as laws). The judicial branch interprets laws.

3. A nurse meets with a senator to lobby for passage of a bill to increase funding for interpreter services. With which of the following branches of the government is the nurse working? a. Constitutional branch of government
- Executive branch of government
 - Legislative branch of government
 - Judicial branch of government

ANS: C

The legislative branch of government is composed of the Senate and the House of Representatives. The legislative branch identifies problems and proposes and then debates, passes, and modifies laws to address those problems. There is not a constitutional branch of the government. The executive branch administers and regulates policy. The judicial branch interprets laws.

4. Which of the following statements best describes why the federal government has become involved in health care? a. The states asked the federal level to become involved.
- Because of rising costs to the states, the federal budget needed to be used to pay for necessary services.
 - The Constitution gives the federal government the power to promote the general welfare.
 - This step was necessary to standardize care on a national level.

ANS: C

One of the first constitutional challenges to a federal law passed by Congress was in the area of health and welfare in 1937. The Supreme Court (judicial branch) reviewed the legislation in question and determined, through interpretation of the Constitution, that such federal governmental action was within the powers of Congress to promote the general welfare. According to Article I, Section 8 of the US Constitution Congress has multiple roles in relation to health care: provide for the general welfare, regulate commerce among the states, raise funds to support the military, and provide spending power. Thus, Congress was within its role to become involved in health care and was not asked to do so by the states or used to standardize care on the national level.

5. A client states to the nurse, "I have heard the Affordable Care Act is supposed to help improve the health care I receive, but so far I have seen no benefits from this legislation." Which of the following statements would be the best reply by the nurse? a. "Maybe you have not directly seen the changes; however, several things have changed in health care because of this bill."
- "It will take years to see any effects from the act because of the delays in implementation of the changes."
 - "This legislation will primarily improve care for the elderly and poor populations, so this is why you may not have seen any benefits."
 - "The way health care operates at the federal and state levels has changed, so most individuals will not see any direct impact."

ANS: A

It is possible that unless one has been in a situation where changes have been made, that one may not realize any of the effects of this law. The goal of the Affordable Care Act was to improve the health of the nation and access care. Several changes to health care have already been made because of this legislation, and more changes will continue in the future. Multiple provisions of the act will affect individuals and families.

6. What was the significance of the 1979 Surgeon General's report?
- It planned the goals and priorities for the entire Veterans Administration medical system.
 - It vastly increased funding for health promotion activities.
 - It identified the use of tobacco as a cause of lung cancer.
 - It created national goals for promoting health and preventing disease.

ANS: D

The 1979 Surgeon General's report began a focus on preventing disease and promoting health for all Americans. It was a national effort with all levels of government, as well as other interested parties, involved. The 1979 report did not plan goals and priorities

for the Veterans Administration medical system; rather it looked at health of all Americans. There was no funding associated with the report. It addressed prevention of disease and promotion of health for multiple diseases, not just lung cancer.

7. A nurse is advocating for the public health department to increase the number of public health nurses that it employs. Which of the following factors should the nurse emphasize?
- Providing disease investigation training
 - Providing research opportunities
 - Providing leadership experiences
 - Providing salaries commensurate with responsibilities

ANS: D

Through the input of the Division of Nursing's National Advisory Council for Nursing Education and Practice (NACNEP), the Division of Nursing sets policy for nursing nationally. A few of the factors indicated by the NACNEP that need to be in place to support the public health nurse role are competitive salaries commensurate with responsibilities, experience in health promotion and prevention, long-term trusting relationships in the community, and a commitment to social justice and eliminating health disparities. The Division of Nursing's National Advisory Council for Nursing Education and Practice (NACNEP) did not emphasize the importance of providing disease investigation training, research opportunities, or leadership experiences.

8. A nurse is determining whether a hospital has the right to require infected patients to be isolated against their will. To which type of law will the nurse refer?
- Common law
 - Constitutional law
 - Legislation and regulation
 - Judicial law

ANS: B

Constitutional law provides the right to intervene in a reasonable manner to protect the health, safety, and welfare of the citizenry. State power concerning health care is called police power. This power allows states to act to protect the health, safety, and welfare of their citizens. The state must show that it has a compelling interest in taking actions, especially actions that might infringe on individual rights. The state can isolate an individual to prevent an epidemic, even though this infringes on individual rights. The community's rights are deemed more important than the individual's rights when there is a threat to the health of the public. Judicial law, based on court and jury decisions, and the principles of common law (precedent, justice, fairness, respect for an individual's autonomy, and self-determination) are both used by court's as the basis to make a decision and do not relate to having the right to isolate a patient. Legislation is law that comes from the legislative branches of the government and regulations are specific statements of law related to defining or implanting individual pieces of legislation. Neither are as important in this case as the constitutional law of the police power of the states in regards to isolation of a patient.

9. Who is responsible for determining the scope of practice for registered nurses?
- American Nurses Association
 - Federal legislators
 - State legislators
 - US Department of Health and Human Services

ANS: C

Health care practitioners are subject to the laws of the state in which they practice. The state nurse practice acts define the practice of professional nursing, identify the scope of nursing practice, set educational qualifications, and determine legal titles. The nurse practice act is governed by legislators in each state. The American Nurses Association, US Department of Health and Human Services, and federal government do not determine the scope of practice for nurses; this responsibility is the role of state governments. The US Department of Health and Human Services is the agency most heavily involved with the health and welfare of US citizens.

10. Which of the following statements by a client indicates a *lack of understanding* regarding an appropriate reason to sue for professional negligence?
- "Because the health care workers didn't turn my mother every 2 hours, she developed bedsores."
 - "I received permanent nerve damage because they would not remove a cast that was too tight."
 - "My daughter wasn't given a call light, and for a whole shift no one checked on her condition."
 - "They amputated the wrong leg during surgery."

ANS: C

Professional negligence, or malpractice, is defined as an act (or failure to act) that leads to injury. All of the choices specify an injury, except for "My daughter wasn't given a call light, and for a whole shift no one checked on her condition," in which case the care was substandard but no injury resulted. The incorrect responses all specify an injury whereas professional negligence, or malpractice, is defined as an act (or failure to act) that leads to injury.

11. Which of the following statements best describes the law in relation to clinical practice by nursing students?
- Students are considered certified until licensure is obtained.
 - Students are expected to meet the same standard of care as the professional nurse.
 - Students are not legally liable for errors because they practice under the license of their instructor.
 - Students have a scope of practice determined by the nurse practice act.

ANS: B

Nursing students need to be aware that the same laws and rules that govern the professional nurse apply to them as well. Students are expected to meet the same standard of care as that met by any licensed nurse practicing under the same or similar circumstances. Although it is true that students cannot practice outside the scope of practice determined by the nurse practice act, they also cannot perform the tasks and responsibilities of the licensed practitioner *within* the scope of practice until they have

received adequate knowledge; therefore, the scope of practice for the student is determined by the instructor, based on the student's level of education.

12. A nurse wishes to see a bill passed to support funding for the use of interpreters for clients with limited English proficiency. Which of the following would be the best time for the nurse to request support from the local senator, who is not on the committee that is reviewing this bill?
- When the bill is first assigned to a committee.
 - When the bill is discussed and debated within the committee.
 - When the bill moves out of committee to be heard by the entire Senate.
 - When the bill passes the Senate and moves to the House of Representatives.

ANS: C

Once the bill is passed by committee and moves out of committee to be heard by all senators, it will be important to contact this senator, who will then be in a position to act on it. To contact the senator when the bill is first assigned to the committee or is being discussed and debated within the committee is too early to effectively influence the individual senators. The nurse would not want to wait until after the vote has been taken in the Senate because it would then be too late for the senator to act.

13. The state board of nursing has written new regulations to clarify in a more concrete manner what the nurse practice act allows and requires. Which of the following effects will this change have on nurses in this state? a. None, because they are just helpful guidelines for maximum safety.
- None, because they just give specifics that may change over time.
 - Major, because prudent nurses would follow such regulations.
 - Major, because these rules and regulations have the effect of law and must be obeyed.

ANS: D

When the legislature passes a law and delegates its oversight to an agency, it gives that agency the power to make regulations. Because regulations flow from legislation, they have the force of law. Whether prudent or not, nurses are obligated to practice consistent with these regulations. All nurses have the responsibility to follow the changes that are in place by legislation. They are laws that must be followed, not guidelines.

14. A bill with the potential to decrease health care services is passed by Congress. Which of the following actions should the nurse take to influence the bill's implications?
- Exercise veto power by calling for petitions from health care agencies.
 - Contact the regulatory agency and participate in public hearings.
 - Call members of congress to request that they rescind the legislation that was passed.
 - Discuss the change in services with the administrators at the hospital.

ANS: B

Once a bill is passed and becomes law, it is too late to influence congressional members to change their vote; however, it is not too late to influence the outcome of the vote because the nurse can influence how the law is regulated. An agency typically writes the regulations that control how the law is implemented in more specific detail. Often this process can be just as important as lobbying against a bill because it shapes the final implementation of the law. Health care agencies do not have the ability to veto a bill. After a bill has been passed, it is too late to contact members of congress. Calling the hospital will not change the implications of the bill. Contact must be made with the regulatory agency in order to influence how the law is regulated.

15. Which of the following agencies has the most influence on the health and welfare of US citizens?
- Agency for Healthcare Research and Quality (AHRQ)
 - Centers for Disease Control and Prevention (CDC)
 - US Department of Health and Human Services (USDHHS)
 - World Health Organization (WHO)

ANS: C

As the agency to which most health care legislation is delegated, the USDHHS is the agency most heavily involved with the health and welfare of citizens. The AHRQ and CDC are divisions of the USDHHS. WHO's policy-making body provides policy options and guides but not laws. In the textbook, only the USDHHS is discussed regarding its responsibility for Medicare and Medicaid through the Centers for Medicare and Medicaid Services (CMS).

16. Which of the following laws established programs for provision of health services for women and children and supported community-oriented nursing practice?
- Early Periodic Screening and Developmental Testing (EPSDT) Initiative
 - Healthy People 2000* Initiative
 - Sheppard-Towner Act
 - State Child Health Improvement Act (SCHIP)

ANS: C

The Sheppard-Towner Act of 1921 played an important role in the development of public health policy, public health nursing, and social welfare policy. Of particular importance was the fact that it established standards for programs to serve women and children and made nurses available to provide these services in the community setting. Within the Sheppard-Towner Act was a provision to start the EPSDT initiative. SCHIP provides insurance for children and families who cannot otherwise afford health insurance.

Healthy People 2000 focuses on promoting health and preventing disease for all Americans.

MULTIPLE RESPONSE

1. Which of the following describes the significance of the passage of The Public Health Threats and Emergencies Act? (*Select all that apply.*)
- It funded ongoing activities of the public health system.
 - It led to improved water quality and food safety guidelines.

- c. It included funding for public health activities.
- d. It validated that the public health system was prepared for terrorism.
- e. Expanded the role of Secretary of HHS to include aspects of public health emergencies.

ANS: B, C

The Public Health Threats and Emergencies Act was the first federal law to comprehensively address the public health system's preparedness for bioterrorism and other infectious disease outbreaks and signaled the beginning of renewed interest in public health as the protector for entire communities. The focus of this law was to address emerging threats to the public's health and authorize the Secretary of HHS to take appropriate response actions during a public health emergency, including investigations, treatment, and prevention. A focus was the improvement of water quality and food safety. It did not support the ongoing activities of public health. It did not validate the public health system was prepared for terrorism.

2. Which of the following best describes the importance of the World Health Organization (WHO) to the United States? (*Select all that apply.*)
- a. Provides daily information on disease occurrences.
 - b. Establishes international standards for antibiotics and vaccines.
 - c. Creates international legislation regarding international cooperation.
 - d. Supports national programs to fight disease when asked to do so.
 - e. Monitors for adverse drug reactions.

ANS: A, B, D, E

Some WHO services that benefit all countries (including the United States) are providing day-to-day information service on the occurrence of internationally important diseases; publishing the international list of causes of disease, injury, and death; monitoring adverse reactions to drugs; and establishing international standards for antibiotics and vaccines. Individual countries can request assistance with strengthening the delivery of health services, supporting national programs to fight disease, and training health workers—which the United States does not. WHO can suggest but cannot legislate to individual countries.

3. Which of the following activities is the responsibilities of the Centers for Disease Control and Prevention (CDC)? (*Select all that apply.*)
- a. Conduct research to enhance disease prevention.
 - b. Detect and investigate infectious disease problems.
 - c. Develop public health policies.
 - d. Publish national goals for promoting health and preventing disease.
 - e. Serves as an advocate of public health policies

ANS: A, B, C, E

The mission of the CDC is to promote health and quality of life by preventing and controlling disease, injury, and disability. To monitor health, the CDC will detect and investigate health problems, conduct research that will enhance prevention, and develop and advocate sound public health policies and other prevention strategies. The safety and health of the workplace is the specific responsibility of OSHA. The CDC cannot write or pass legislation. The USDHHS published national health goals in *Healthy People 2020*.

4. A nurse is visiting a state legislator to encourage the legislator to vote for a particular health bill that the state nurses association has endorsed. Which of the following actions would be most important for the nurse to complete? (*Select all that apply.*)
- a. Encourage the legislator or staff to ask relevant questions.
 - b. Be friendly and engage in small talk so that rapport can be established.
 - c. Be aware that legislators are well informed; don't insult the legislator by stating information that is obvious.
 - d. Have a handout that summarizes all the major points in support of the bill.

ANS: A, D

Legislators might not be well informed about every issue, so they need and want important information. The nurse should allow time for questions or clarifications of information shared and have the material on a handout for the legislator's convenience. It is also helpful to invite the legislator to attend nursing conferences or meetings where health issues will be discussed. The nurse should not waste time with small talk but briefly present his or her stand, emphasizing other nurses who support the bill, because numbers count. Legislators might not be well informed about every issue, so they need and want important information that the nurse can provide.

5. A nurse would like to become involved in political action. Which of the following actions would be most appropriate for the nurse to accomplish this goal? (*Select all that apply.*)
- a. Become a member of the state nurses association.
 - b. Be friendly with everyone, whether supportive or not of your ideas.
 - c. Focus on being appointed to the state level committees.
 - d. Focus all your efforts on your specialty practice area and your employment site.
 - e. Volunteer to serve on relevant committees.

ANS: A, B

A nurse wishing to become politically involved should begin by joining the state nurses association, networking with others involved, and volunteering to serve on committees or in offices. Be friendly and network to increase your knowledge beyond your own workplace or specialty and seek opportunities to share expertise with others. Becoming involved locally is a good opportunity to start becoming involved in political action and allows for networking at the local level. Seeking opportunities beyond one's workplace or specialty area allows the nurse to gain additional knowledge and share expertise in specialty area with others.

6. A nurse is testifying at a committee meeting about a health bill. Which of the following actions should be taken by the nurse? (*Select all that apply.*)
- a. Briefly describe professional education.