TEST BANK For COMMUNITY AND PUBLIC HEALTH NURSING 10TH EDITION By RECTOR

COMMUNITY AND PUBLIC HEALTH NURSING 10TH EDITION RECTOR

Chapter 1 The Journey Begins: Introduction

- 1. After teaching a group of nursing students about the similarities and differences between public health and community health, which of the following statements by a nursing student would indicate knowledge of the similarities and differences between public health and community health?
- A) <Community health nursing is defined as nursing care that is provided in a community setting, rather than an institutional setting.=
- B) < Public health nursing is defined as nursing care that is provided in an institutional setting.=
- C) < Public health nursing is focused on the health of individuals.=
- D) <Community health nursing can shape the quality of community health services and improve the health of the general public.=

Ans: [

Feedback:

Operating within an environment of rapid change and increasingly complex challenges, this nursing specialty holds the potential to shape the quality of community health services and improve the health of the general public.

- 2. Which of the following statements would best describe the difference between public health nursing and community health nursing?
- A) Public health nursing is focused on the private aspects of health, and community health nursing is focused on the public aspects of health.
- B) In our textbook, the term community health practice refers to a focus on specific, designated communities and is a part of the larger public health effort.

- C) Public health nursing and community health nursing relate to the very same types of services and perspectives.
- D) Both public health nursing and community health nursing are practiced exclusively within institutions.

Ans: B

Feedback:

In this textbook, community health practice refers to a focus on specific, designated communities. It is a part of the larger public health effort and recognizes the fundamental concepts and principles of public health as its birthright and foundation for practice. Public health nursing is focused on the public aspects of health. Public health nursing and community health nursing have distinctive types of services and perspectives. Neither public health nursing nor community health nursing is practiced exclusively within institutions.

- 3. Which of the following is most accurate about the concept of community?
- A) A community is a collection of people who share some important features of their lives. B) Community members live in the same geographic location.
- C) Community members are biologically related.
- D) A community is made up of people who do not necessarily interact with one another and do not necessarily share a sense of belonging to that group.

Ans:

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Feedback:

The broad definition of a community is a collection of people who share some important features of their lives. Community members may not live in the same geographic location as in a commoninterest community or a community of solution. A population is made up of people who do not necessarily interact with one another and do not necessarily share a sense of belonging to that group.

- 4. A group of students are reviewing material for a test on populations, communities, and aggregates. Which of the following indicates that the students understand these concepts?
- A) Members of a population share a sense of belonging.
- B) Communities and populations are types of aggregates.
- C) Individuals of a community are loosely connected.

D) Members of an aggregate share a strong bond.

Ans: B

Feedback:

An aggregate refers to a mass of grouping of distinct individuals who are considered as a whole and who are loosely associated with one another. Communities and populations are types of aggregates. A population is made up of people who do not necessarily interact with one another and do not necessarily share a sense of belonging to the group. A community is a collection of people who chose to interact with one another because of common interests, characteristics, or goals, which form the basis for a sense of unity or belonging.

- 5. Which of the following would a community health nurse identify as a community of common interest?
- A) The global community
- B) Small rural town in a northern state
- C) National professional organization
- D) Counties addressing water pollution

Ans: C

Feedback:

A common-interest community shares a common interest or goal that binds the members together. Membership in a national professional organization is one example. The global community and a small rural town in a northern state would be examples of a geographic community. Counties addressing a water pollution problem would be an example of a community of solution.

- 6. The nurse is working with a community of solution. Which of the following would the nurse expect to find?
- A) A health problem affecting the group
- B) Common goal binding members together
- C) Sharing of a similar goal
- D) Locational boundaries

Ans: A

Feedback:

A community of solution involves a group of people coming together to solve a problem that affects them. A common-interest community involves a collection of people widely scattered geographically who have an interest or goal that binds the members together. A geographical community is one defined by its geographical or locational boundaries.

- 7. Which one of the following statements made by a student would the nurse educator recognize as evidence that a student understands the health continuum?
- A) The distinction between health and illness is well demarcated.
- B) Illness refers to a state of being relatively unhealthy.

- C) The term health is limited to reflect an individual's state.
- D) Treatment of acute conditions reflects the current focus of health care.

Ans: B

Feedback:

Although society typically depicts an absolute line of difference between being either well or ill, health is considered a relative term. Thus, illness is viewed as a state of being relatively unhealthy. Health is typically described as a continuum that involves a range of degrees from optimal health at one end to total disability or death at the other. The line of demarcation is not clear. Health applies to individuals, families, and communities.

Traditionally, most health care has focused on the treatment of acute and chronic conditions at the illness end of the continuum, but this emphasis is shifting to focus on the wellness end.

- 8. When discussing the concept of the health continuum with a class, the nurse educator would be certain to include which statement in the description?
- Wellness is a relative concept, not an absolute, and illness is a state of being relatively unhealthy.
- B) A client's placement on the health continuum is static throughout time.
- C) Health is best described as cyclic.
- D) The health continuum can only be applied to individuals.

Ans: A

Feedback:

Wellness is a relative concept, not an absolute, and illness is a state of being relatively unhealthy. The continuum can change. Because health involves a range of degrees from optimal health at one end to total disability or death at the other, it is often described as a continuum. The health continuum applies not only to individuals but also to families and communities.

- 9. After discussing the leading health indicators with a class, which condition if stated by the class as one of these indicators suggests that the class has understood the information?
- A) Cardiac disease
- B) Mental health
- C) Sedentary lifestyle
- D) Maternal health care

Ans: I

Feedback:

Mental health is a leading health indicator. Other leading health indicators include physical activity, overweight and obesity, tobacco use, substance use, responsible sexual behavior, injury and violence, environmental quality, immunization, and access to health care.

- 10. Which of the following statements about health promotion and disease prevention is the most accurate?
- A) Health promotion and disease prevention include all efforts that seek to move people closer to optimal well-being or higher levels of wellness.
- B) Disease prevention differs from health promotion in that disease prevention is targeted toward a specific disease or diseases.
- C) Health promotion can be described in terms of primary, secondary, and tertiary prevention.
- D) The goal of disease prevention is to raise levels of wellness for individuals, families, populations, and communities.

Ans: B

Feedback:

Health promotion includes all efforts that seek to move people closer to optimal wellbeing or higher levels of wellness. The goal of health promotion is to raise levels of wellness for individuals, families, populations, and communities. Disease prevention is targeted toward a specific disease or diseases and consists of primary, secondary, and tertiary prevention.

- 11. A group of community health nursing students design a health education program for a group of pregnant teens that includes teaching nutrition during pregnancy, demonstrating helpful exercises, and discussing their concerns. This is an example of which of the following?
- A) Health promotion
- B) Treatment of disorders
- C) Rehabilitation
- D) Evaluation Ans: A

Feedback:

The student nurses are engaging in health promotion activities. Health promotion incorporates all efforts that seek to move people closer to optimal well-being or to higher levels of wellness. Treatment of disorders would include direct care for issues involving the group, such as complications that might arise in this population.

Rehabilitation would involve activities to minimize disability or restore or preserve function. Evaluation would involve an analysis of the effectiveness of these activities.

- 12. plan of primary prevention activities. Which of the following might the nurse include? Select all that apply.
- A) Teaching about safe-sex practices to high school students
- B) Encouraging older adults to install safety devices in the bathroom
- C) Providing regular immunization programs for communicable diseases
- D) Participating in cholesterol screening programs at health fairs
- E) Providing skin testing for tuberculosis for children over 1 year of age
- F) Working with a group testing water samples for contamination

Ans: A, B, C Feedback:

Primary prevention activities are those taken to keep illness or injuries from occurring. These include teaching about safe-sex practices, encouraging older adults to use safety devices in the bathroom, and providing regular immunization programs for communicable diseases. Cholesterol screening programs, skin tests for tuberculosis, and working with a group testing water samples for contamination are examples of secondary prevention activities.

- 13. A community health nurse is preparing a presentation for a group of nursing students about community health nursing. Which of the following descriptions about community health nursing would the nurse most likely include in the presentation?
- A) Focusing on addressing continuous needs
- B) Working with the client as an equal partner
- C) Engaging in tertiary prevention as the priority
- D) Encouraging clients to reach out to the nurse

Ans: B

Feedback:

The community health nurse works with the client as an equal partner, encouraging autonomy. At any time, the nurse deals with continuous and episodic needs simultaneously. Primary prevention is the priority for community health nurses. The community health nurse engages in primary prevention as the priority, having the obligation to actively reach out to all who might benefit from a specific activity or service.

- 14. A community health nurse is working with other members of a team that will be implementing a citywide immunization program. The nurse is coordinating the services and addressing the needs of the population groups to ensure which of the following?
- A) Involvement of the community
- B) Client participation
- C) Continuity of service
- D) Plan for follow-up

Ans: C

Feedback:

Working in cooperation with other team members and coordinating services and addressing the needs of population groups are essential to interprofessional collaboration. In doing so, the community health nurse is preventing fragmentation and gaps thereby ensuring continuity of service. Involvement of the community and client participation are important but these help to ensure that the clients are viewed as equal partners of the health care team. A plan for follow-up may or may not be appropriate. In addition, it is the only aspect that may be addressed with the program.

- 15. A community health nurse works to ensure the greatest good for the greatest number of people by applying which of the following?
- A) Secondary prevention activities
- B) Autonomy
- C) Justice
- D) Utilitarianism

Ans: D

Feedback:

The ethical theory of utilitarianism promotes the greatest good for the greatest number. Primary prevention activities, not secondary prevention, are the priority. Autonomy refers to the freedom of choice. Justice involves treating people fairly.

- 16. When working in the community, the community health nurse adopts the teaching plan to ensure that the population understands the basic information provided to address which of the following?
- A) Self-care
- B) Health disparities
- C) Health literacy
- D) Episodic needs Ans: C

Feedback:

Consumers are often intimated by health professionals and are uninformed about health and health care affecting the quality of care.

Adopting a teaching plan to ensure that the population understands the basic information addresses health literacy, the ability to read, understand, and use health care information appropriately. Doing so helps to ensure that the teaching plan will be effective. Self-care refers to the process of taking responsibility for developing one's own health potential by actively participating in promoting one's own health. Health disparities reflect differences in all aspects of health care related to vulnerable populations. Episodic needs are one-time specific negative health events that arise and are not an expected part of life.

- 17. Which of the following would be crucial for the community health nurse to address as the priority when dealing with policy makers about the development of community health programs?
- A) Research-based best practices
- B) Population's make up
- C) Amount of services to be provided
- D) Scarcity of the available resources

Ans: A

Feedback:

Decisions for programs or services are often made on the basis of cost-effectiveness or cost3benefit. Therefore, community health nurses must provide policy makers with information about best practices, grounded in research. Although population make up, amount of services to be provided, and scarcity of resources are factors that may need to be considered, the community health nurse must demonstrate evidence-based practice.

- 18. After a class that described the differences between acute care nursing and community health nursing, which statement by the class about community health nurses indicates successful teaching?
- A) Use a reactive approach.
- B) Seek out potential health problems.
- C) Concentrate on the illness end of the continuum.
- D) Emphasize curative care.

Ans: B

Feedback:

Community health nurses, in contrast to acute care nurses, seek out potential health problems, identifying high-risk groups and instituting preventive programs; use a proactive approach; concentrate on the wellness end of the health continuum; and put less emphasis on curative care.

- 19. Which of the following activities would be associated with a community health nurse? Select all that apply.
- A) Examining infants in a city well-baby clinic B)
 Caring for elderly stroke victims in their homes
- Providing emergency care in an acute care facility
- D) Carrying out epidemiologic research
- E) Participating in health policy analysis

Ans: A, B, D, E Feedback:

Community health nurses work in every conceivable kind of community agency, from a state public health department to a community-based advocacy group. Their duties rang from examining infants in a well- baby clinic or teaching elderly stroke victims in their homes to carrying out epidemiologic research or engaging in health policy analysis and decision making. Providing care in an acute care facility would not be an activity associated with a community health nurse.

- 20. The term health can be described in many different ways. A community health nurse would view health as which of the following?
- A) The absence of disease
- B) The potential to lead a productive life
- C) An environment free of toxins
- D) A holistic state of well-being

Ans: D

Feedback:

Community health nurses view health as a holistic state of well-being, which includes soundness of mind, body, and spirit. Along with this foundational view is the emphasis on wellness, which includes the definition of health as well as the capacity to develop a person's potential to lead a fulfilling and productive life. Health is more than just the absence of disease or an environment free of toxins.

- 21. While interviewing a client, which of the following statements would a nurse identify as reflecting an objective dimension of health?
- A) <I'm feeling better since I started taking that medication.=
- B) <Life is pretty good right now, except for an occasional upset stomach.=
- C) <I'm able to wash myself in the mornings with just a bit of help.=
- D) <Sometimes when I wake up, I don't even

want to face the day.=

Ans: C

Feedback:

The objective dimension of health involves one's ability to function in daily activities. The statement about being able to care for one's self is an example. The statements of feeling better with medication, life being pretty good, and not wanting to face the day are examples of the subjective dimension of health, which involves how people feel.

- 22. When employing a population-oriented focus, the community health nurse would do which of the following?
- A) Assess the groups' relationships looking for a common need.
- B) Consider the members individually for similarities.
- C) Focus on the geographical area of the population.
- D) Promote the groups' dependency for improving health.

Ans: A

Feedback:

A population-oriented focus requires the assessment of relationships, considering the groups or communities in relationship to the rest of the community to discover common needs or risks for a common health problem. The nurse does not consider the groups or communities separately but rather in context. The population may or may not be delineated by the geographical area. The community health nurse encourages individuals' participation to promote their autonomy rather than permitting dependency.

- 23. A community health nurse is involved in a project to evaluate the health of a city. Which of the following findings would suggest that the city would most likely need additional programs?
- A) Citizens are actively involved in the city's department of recreation and after-school programs.
- B) The construction of affordable organized housing developments and communities is nearing completion.
- C) Approximately one third of the people are recently unemployed due to closure of the automotive factory.
- D) Several new recreational facilities for adults and children have been created at several locations.

Ans: C

Feedback:

A healthy city is one in which there is continual creation and improvement the physical and social environments with expansion of community resources so that people can mutually support one another. It is characterized by the meeting of basic needs for all of the city's people. This would include food, water, shelter, income, safety, and work. Loss of employment of one third of the city's workforce would be a threat to the health of the city and necessitate intervention. Active involvement in the city's functioning, affordable housing, and recreational facilities are suggestive of a healthy city.

Chapter 2 Public Health Nursing in the Community

- 1. A community health nurse is engaging in assurance activities. Which of the following would best explain these activities?
- A) Gathering and analyzing information that will affect the health of the people to be served
- B) Providing leadership in facilitating community groups toward meeting their needs, often involving changes in and additions to existing laws

- C) Being involved in activities to make certain that necessary services are being provided to the community
- D) Accessing relevant data that enable identification of strengths, weaknesses, and needs within the community

Ans: C

Feedback:

Assurance activities are those activities that make certain that services are provided and include focusing on the availability of necessary health services throughout the community, maintaining the ability of public health agencies and private providers to manage day-to-day operations as well as the capacity to respond to critical situations and emergencies. Assessment involves gathering and analyzing information that will affect the health of those to be served and accessing relevant data to enable the nurse to identify strengths, weaknesses, and needs. Policy development involves providing leadership in facilitating community groups.

- 2. When fulfilling the function of assessment, which of the following would be most important for the community health nurse to do?
- A) Secure the trust of the clients
- B) Gather appropriate information
- C) Interact with key community leaders
- D) Use a variety of assessment tools

Ans: A

Feedback:

Although securing and maintaining the trust of others is pivotal to all nursing practice, it is even more critical when working in the community. Trust can afford a nurse access to client populations that are difficult to engage, to agencies, and to health care providers. As difficult as it may be for the nurse to gain the trust and respect of the community, if it is ever lost, these attributes can be difficult if not impossible to regain. Gathering information, interacting with key community leaders, and using a variety of assessment tools are important, but they can only occur after trust is established.

- 3. The community health nurse is engaging in the core function of policy development. With which of the activities would the nurse most likely be involved?
- A) Monitoring health status to identify community health problems
- B) Empowering communities about important health issues
- C) Linking individuals to needed personal health
- D) Ensuring a competent health care workforce is available

Ans: B

Feedback:

With policy development, the community health nurse would be involved in informing, educating, and empowering people about health issues. Monitoring health status is associated with the assessment function.

Linking individuals to needed personal health services and ensuring a competent public health and personal health care workforce are associated with assurance.

- 4. A community health nurse is collaborating with local community leaders to prepare a community disaster plan. Which function is the nurse fulfilling?
- A) Research
- B) Assurance
- C) Policy development
- D) Assessment Ans: B

Feedback:

Community health nurses perform the assurance function at the community level when they collaborate with community leaders in the preparation of a community disaster plan. Research is demonstrated by gaining new insights and innovative solutions to health problems. Policy development would involve client information, education and empowerment, mobilization of community partnerships, and the development of plans and policies to support community health efforts. Assessment involves monitoring health status for community health problems and diagnosing and investigating health problems and hazards in the community.

- 5. A community health nurse has collected data for several months on the birth weights of newborns to mothers who smoked throughout their pregnancy. This nurse is acting in which role?
- A) Collaborator
- B) Manager
- C) Researcher
- D) Clinician

Ans: C

Feedback:

The nurse is assuming the role of a researcher, that is, engaging in systematic investigation that includes data collection. In the collaborator role, the nurse would work with numerous members of the health team, working jointly with others in a common endeavor. In the manager role, the nurse exercises administrative direction toward the accomplishment of specified goals. In the clinician role, the nurse ensures the provision of health care services to individuals, families, groups, and populations.

6. A nurse in community health nursing setting works with police officers, social workers, health educators, and other nurses to promote the health of clients. The nurse is acting in which role?

- A) Clinician
- B) Educator
- C) Researcher
- D) Collaborator Ans: D

Feedback:

The nurse is assuming the role of collaborator. In this role, the community health nurse works jointly with many individuals to benefit client care. In the clinician role, the nurse ensures the provision of health care services to individuals, families, groups, and populations. As an educator, the nurse is the health teacher and provides information to community clients. In the researcher role, the community health nurse engages in systematic investigation, collection, and analysis of data for solving problems and enhancing community health practice.

- 7. A community health nurse is interviewing for employment. The interviewer describes some of the typical activities that the nurse would be involved in, such as making home visits to families, holding immunization clinics for infants and children, and setting up flu-shot clinics for elders. The interviewer is describing which role?
- A) Educator
- B) Advocate
- C) Clinician
- D) Manager

Ans: C

Feedback:

The interviewer is describing direct care activities associated with the clinician role. As an educator, the nurse is the health teacher and provides information to community clients. In the advocate role, the nurse pleads for the clients' cause or acts on their behalf. In the manager role, the nurse exercises administrative direction toward the accomplishment of specified goals.

- 8. A community health nurse is reviewing his or her schedule for the day. Included in his or her activities are planning client care, leading a staff conference, and supervising a new staff member. This nurse is fulfilling which role?
- A) Advocate
- B) Manager
- C) Collaborator
- D) Researcher Ans: B

Feedback:

When functioning in the manager role, the nurse exercises administrative direction toward the accomplishment of specified goals. Overseeing client care as a case manager, supervising ancillary staff, managing caseloads, running clinics, or conducting community health needs assessment projects are examples of activities associated with the manager role. In the advocate role, the nurse pleads for the clients' cause or acts on their behalf. In the collaborator

role, the nurse would work with numerous members of the health team, working jointly with others in a common endeavor. In the researcher role, the community health nurse engages in systematic investigation, collection, and analysis of data for solving problems and enhancing community health practice.

- 9. While providing care to a family at a local center, the community health nurse contacts the local department of social services to help the family attain assistance with health insurance coverage. The nurse also gives the family a list of pharmacies where they can get their prescriptions filled. The nurse is acting in which role?
- A) Educator
- B) Leader
- C) Clinician
- D) Advocate Ans: D

Feedback:

The nurse is acting in the role of advocate, by pleading their cause and acting on their behalf. The nurse acts as an advocate by showing clients what services are available, the ones to which they are entitled, and how to obtain them. As an educator, the nurse is the health teacher and provides information to community clients. As a leader, the nurse directs, influences, or persuades others to effect change that will positively impact people's health and move them toward a goal. In the clinician role, the nurse ensures the provision of health care services to individuals, families, groups, and populations.

- 10. Which of the following best exemplifies the attributes of a community health nurse in the researcher role?
- A) Gaining the trust and respect of the staff members
- B) Interpreting abstract ideas so others can understand
- C) Implementing a staff development program for a technique
- D) Evaluating the correlation between variables in specific health conditions

Ans: [

Feedback:

Attributes of a researcher include a spirit of inquiry, careful observation, analytic skills, such as evaluating the possible cause and effect of a situation, and tenacity. Gaining the trust and respect of staff, interpreting abstract ideas, and implementing a staff development program are examples of the management skills used in the role of manager.

11. Which of the following statements about the role of educator within the framework of public health nursing functions is true?

- A) The educator role has the potential for finding greater receptivity and providing higheryield results.
- B) People are unable to recognize the value of health and are not well motivated to achieve higher levels of wellness. C) It is only possible for a nurse to reach a limited number of persons.
- D) The public's higher level of health consciousness hinders the educator's role.

Ans: A

Feedback:

The educator role has the potential for finding greater receptivity and providing higheryield results. People are recognizing the value of health and are increasingly motivated to achieve higher levels of wellness. With an emphasis on populations and aggregates, the educational efforts of community health nursing are appropriately targeted to reach many people. One factor that enhances the educator role is the public's higher level of health consciousness.

- 12. Which of the following statements about the importance of the role of collaborator is true?
- A) Community health nurses frequently practice in isolation.
- B) Successful community health practice depends on multidisciplinary collegiality and leadership.
- C) Community health nurses must assert themselves as the most powerful person on the health care team to ensure each client receives services that are necessary.
- D) It is best for community health nurses to focus on what they, as nurses, can do for their clients.

Ans: B

Feedback:

Community health nurses seldom practice in isolation. As collaborators, nurses work jointly with others in a common endeavor, cooperating as partners. Successful community health practice depends on multidisciplinary collegiality and leadership. The community health nurse's collaborator role requires skills in communicating, in interpreting the nurse's unique contribution to the team, and in acting assertively as an equal partner.

- 13. Which of the following statements about the community health nurse's selection and practice of each role is true?
- A) Within a given time, a community health nurse may practice multiple roles.

- B) The knowledge that vulnerable populations need someone to guide them through the complexities of the health care system and the nurse can serve as an advocate for them
- C) The researcher role for community health nurses involves only the use of quantitative statistics. D)

The leadership role consists solely of managing staff.

Ans: В

Feedback:

Community health nurses wear many hats while conducting day-to-day practice. At any given time, however, one role is primary.

They need someone to guide them through the complexities of the system and assure the satisfaction of their needs. This is particularly true for minorities and disadvantaged groups. Although research technically involves a complex set of activities conducted by persons with highly developed and specialized skills, research also means applying that technical study to real-practice situations. As leaders, community health nurses seek to initiate changes that positively affect people's health.

- 14. A community health nurse is involved in education, screening, referral, and support for the individuals of a specific religious congregation. The nurse is practicing in which setting?
- Occupational health nursing A)
- B) Faith community nursing
- C) School nursing
- D) Residential institution nursing

Ans:

Feedback:

In faith community nursing, the practice focal point is the faith community and the religious belief system provided by the philosophical framework. It may be called church-based health promotion, parish nursing, or primary care parish nursing practice. Occupational health nursing occurs in business and industry settings. School nursing, as the name implies, involves practicing in the school system, including from preschools to colleges and universities. Residential institution nursing occurs in any facility where the clients reside such as a halfway house or continuing care center.

15. Which of the following differentiates the home setting for community health nursing from other settings?

- A) The nurse acts primarily as an educator. B) The client is viewed within his or her environment.
- C) Technologically advanced care is limited.
- D) The home is being used less frequently today.

Ans: B

Feedback:

In the home, unlike most other health care settings, clients are on their own <turf,= such that the client is the host, comfortable and secure in familiar surroundings, and the nurse is a guest. Although education may be a major component of care in the home, all community health nursing roles are performed to varying degrees. In addition, technologically advanced care in the home is increasing in demand, with the home being the most frequently used setting for community health nursing.

- 16. After teaching a group of students about the various settings for community health nursing, the instructor determines that this teaching was successful when the students identify which of the following as an example of ambulatory service setting?
- A) Local preschool
- B) Halfway house
- C) Continuing care center
- D) Family planning clinic

Ans: D

Feedback:

Ambulatory service setting includes a variety of venues for community health nursing in which clients come for day or evening services that do not include overnight stays. One example is a family planning clinic. A local preschool would be an example of a school setting. A halfway house and continuing care center are examples of residential institutions.

- 17. After teaching a group of students about the changing roles of the community health nurse in the occupational setting, the instructor determines that the students need additional teaching when they state which of the following?
- A) Occupational health nurses are increasing their role as employee advocates.
- B) Health education is a key function of the occupational health nurse.
- C) There is a greater emphasis on the occupational health nurse's role as a clinician.
- D) Collaboration with other health care providers fosters the offering of better services.

Ans: C

Feedback:

The clinician role was primary for many years, as nurses continued to care for sick or injured employees at work. However, recognition of the need to protect employees' safety and, later,

to prevent their illness led to the inclusion of health education in the occupational health nurse role. Occupational health nurses also act as employee advocates, assuring appropriate job assignments for workers and adequate treatment for job- related illness or injury. They collaborate with other health care providers and company management to offer better services to their clients. They act as leaders and managers in developing new health services in the work setting, endorsing programs such as hypertension screening and weight control.

- 18. A community health nurse is working as a lobbyist for health legislation for AIDS research at the state capital. This nurse is practicing in which setting?
- A) Faith community
- B) Ambulatory service
- C) Residential institution
- D) Community at large Ans: D

Feedback:

The community at large is not confined to a specific philosophy, location, or building. It serves as the setting for practice of a nurse who serves on health care planning committees, lobbies for health legislation at the state capital, runs for a school board position, or assists with flood relief in another state or country. Faith community nursing focuses on activities involving the faith community and religious belief system.

Ambulatory service settings include a variety of venues in which clients come for day or evening services that do not include overnight stays. Residential institutions include any facility where clients reside.

- 19. Which of the following is included in the most accurate description of school nursing?
- A) This is one community health setting where the role is static.
- B) The primary role of school nurses is clinician.
- C) The practice of school nurses is widening.
- D) School nurses rarely act as advocates.

Ans: C

Feedback:

School nurses, whose primary role initially was that of clinician, are widening their practice to include more health education, interprofessional collaboration, and client advocacy.

- 20. A community health nurse is assuming the role of a manager. Which function would be most important for the nurse to address first?
- A) Planning
- B) Organizing
- C) Leading
- D) Controlling Ans: A

Feedback:

The management process incorporates a series of problem-solving activities or function: planning, organizing, leading, and controlling and evaluating. Although these activities occur simultaneously, they are sequential with planning being the first activity.

- 21. A nursing student is interviewing a community health nurse about the various roles the nurse assumes and the skills and behaviors necessary to perform each role. Which of the following would the community health nurse identify as being essential to the role of an advocate? Select all that apply.
- A) Assertiveness
- B) Ability to plan
- C) Ability to negotiate
- D) Risk taking
- E) Holistic view
- F) Questioning attitude Ans: A, C, D Feedback:

As an advocate, the community health nurse must be assertive, willing to take risks, be able to communicate and negotiate well, and be able to identify resources and obtain results. The ability to plan is associated with the manager role. A holistic view is critical to the community health nurse acting as a clinician. A questioning attitude is necessary for the role as a researcher.

- 22. A community health nurse works in a busy community health nursing practice. Today, the nurse is devoting the day to the educator role. With which of the following activities would the nurse be involved? Select all that apply.
- A) Planning seven home visits today
- B) Working on a new curriculum for high-risk teens
- C) Meeting with colleagues to discuss organizational changes in the office
- D) Ordering pamphlets over the Internet to be used in a parenting class
- E) Tabulating data from surveys distributed to elders during a flu-shot clinic
- F) Going to social services to speak up for a family in his or her caseload

Ans: B, D

Feedback:

In the educator role, the nurse would work on a new curriculum for high-risk teens and order pamphlets for use in a parenting class. Planning seven home visits would be part of the clinician role. Meeting with colleagues to discuss organizational changes would be part of the manager role. Tabulating data from surveys would be part of the researcher role. Speaking up for a family in the nurse's caseload would be an example of the advocate role.

- 23. A community health nurse is devoting the day to being a manager. Which activities would the nurse expect to perform? Which of the following activities are part of this role? Select all that apply.
- A) Orienting three new community health nurses in the agency
- B) Attending a strategy meeting for a new service the community will be offering
- C) Working with a team to direct a smoking cessation program in public areas
- D) Investigating an outbreak of Salmonella in the community
- E) Tabulating the findings of exploring immunization practices among teens
- F) Reviewing the staff evaluations to assist with planning future in-services

Ans: A, B, F Feedback:

As a manager, a community health nurse would be involved in orienting new nurses in the agency, attending meetings for new services to be offered, and reviewing staff evaluations. Working with a team to direct a smoking cessation program in public areas exemplifies the leadership role. Investigating an outbreak of Salmonella and tabulating the findings of immunization practices depict the researcher role.

- 24. Of all the nursing roles assumed by community health nurses, which role must be assumed in every situation?
- A) Researcher
- B) Manager
- C) Leader
- D) Clinician Ans: B Feedback:

The type and number of roles that are practiced vary with each set of clients and each specific situation, but the nurse should be able to successfully function in each of these roles as the particular situation demands. The role of manager is one that the nurse must play in every situation, because it involves assessing clients' needs, planning and organizing to meet those needs, directing and leading clients to achieve results, and controlling and evaluating the progress to ensure that the goals and clients' needs are met.

- 25. Which of the following are core values of professional behavior that are unique to public health nursing? Select all that apply.
- A) Community/population as client
- B) Prevention
- C) Rehabilitation
- D) Partnership
- E) Healthy environment

F) Diversity

Ans: A, B, D, E, F

Feedback:

Core values of professional behavior emphasize community/population as client, prevention, partnership, healthy environment, and diversity. Rehabilitation is not population centered.

Chapter 3 History and Evolution of Public Health Nursing

1. A group of students are reviewing the various historical events associated with the evolution of community health nursing in preparation for a test. They identify the time from 1970 to the present as the era known as community health nursing based on the understanding that which of the following influences

contributed most to this change?

- A) The settings and the nurses delivering health care in the community
- B) Decisions made by the American Nurses

Association

- Decisions made by physicians in a variety of community settings
- D) The demand to eliminate the word <public= from health services

Ans: A

Feedback:

The numbers, increasing variety of settings, and many nurses coming to work in the community settings since the 1970s have contributed most significantly to the change. As a result, professional associations supported the broader term of community health nursing. Physician decisions played no role in the change. The term public health nursing still remains.

- 2. Before the mid-1800s, early home care nursing was best recognized by which of the following?
- A) Technical advances with the Industrial Revolution making major changes
- B) Care provided by family members, friends, and religious groups in the home
- C) Accomplishments stemming from the work of Florence Nightingale
- D) Formal organization of visiting nursing to provide care to the sick poor

Ans: B

Feedback:

Before the mid-1800s, early home care was characterized by care of the sick in the home by family members, friends, and religious groups. Technical advances came after 1850, as did the work of Florence Nightingale and the formal organization of visiting nurses to provide care to the sick poor.

- 3. Community health nursing has a long history of contributing to the health of populations. Which of the following forms of service would the nurse identify as being most recent?
- A) Voluntary home nursing care for the sick poor via district nursing
- B) Care provided termed public health nursing C)
 Lay and religious groups providing care to the sick
 poor in their homes
- D) Focus on populations with community health nursing seen as a specialty field

Ans: D

Feedback:

The four stages of community health nursing followed from lay and religious groups providing care in the early years before 1850, the more specialized <health nurses= or district nursing after the mid-1800s, concern for the health of the general public from 1900s to 1970, and finally community health nursing as a specialty with a focus on populations since 1970.

- 4. Which factor was the most significant feature associated with district nursing?
- A) Caring for the sick
- B) Teaching hygiene and cleanliness
- C) Preventing illness
- D) Gathering statistical data

Ans: B

Feedback:

Although district nurses primarily cared for the sick, they also taught cleanliness and wholesome living to their clients. This early emphasis on prevention and health became one of the distinguishing features of district nursing and later of public health nursing. Preventing illness and gathering statistical data were key contributions of Florence Nightingale during the Crimean War of the early 1850s.

5. In their early stages, district nursing was sponsored by which of the following?

- A) Religious organizations
- B) Private philanthropy
- C) Contributions
- D) Public funding

Ans: A

Feedback:

Early district nursing services were founded by religious organizations that served as their sponsors. Later sponsorship shifted to private philanthropy. Funding came from contributions and fees charged to clients on an ability-to-pay basis. Finally, visiting nursing began to be supported by public money.

- 6. Which of the following would characterize the public health stage of community health nursing?
- A) Voluntary health agencies emphasizing disease prevention
- B) Family considered as the primary unit of care
- C) Service provision to the sick poor population
- D) Primary health care as the key to health for all

Ans: B

Feedback:

The public health nursing stage was characterized by service to the public, with the family targeted as a primary unit of care. Official health agencies, which placed a greater emphasis on disease prevention and health promotion, provided the chief institutional base. Primary health care as the key to health for all characterizes the community health nursing stage.

- 7. At which time did the focus of district nursing broadened to include the health and welfare of the general public?
- A) Beginning of 20th century
- B) In the late 19th century
- C) Prior to the 1850s
- D) By the early 1970s

Ans: A

Feedback:

The focus of district nursing broadened to include the health and welfare of the general public by the beginning of the 20th century or the early 1900s. In the late 19th century, district nurses were ill-prepared to cope with their clients' multiple health and social problems resulting from widespread immigration and filled tenement housing that led to inadequate sanitation, unsafe and unhealthy working condition, and barriers adding to poverty and disease. District nursing did not develop until after 1850. The early 1970s is associated with the emergence of community health nursing.

- 8. A student is planning a presentation about the evolution of public health nursing. As part of the presentation, the student would identify which person as being the first one to use the term <public health nursing=?
- A) Jessie Sleet
- B) Lillian Wald
- C) Lina Rogers

D) Margaret Sanger Ans: B Feedback:

Lillian Wald, a leading figure in the expansion of district nursing, was the first to use the term <public health nursing= to describe the specialty. Jessie Sleet was credited as being the first Black public health nurse. Lina Rogers was credited with being the first school nurse. Margaret Sanger was the nurse who opened the first birth control clinic in America that eventually resulted in the formation of the International Planned Parenthood Federation.

- 9. Which of the following are important contributions made by Lillian Wald to the profession of public health nursing? Select all that apply.
- A) Demonstrating the effectiveness of placing school nurses in public schools to reduce absenteeism and improve follow-up of problems identified in school children B)

 Promoting the use of birth control
- C) Convincing the Metropolitan Life Company that nurse intervention could reduce death rates
- D) Providing rural <frontier nursing= to serve mountain families in Kentucky
- E) Founding the National Organization for Public Health Nursing (NOPHN) Ans:

A, C, E

Feedback:

Lillian Wald contributed to the profession of public health nursing by demonstrating the effectiveness of placing school nurses in public schools to reduce absenteeism and improve follow-up of problems identified in school children, convincing the Metropolitan Life Company that nurse intervention could reduce death rates, and Founding the National Organization for Public Health Nursing (NOPHN).

- 10. After a class discussion about the contributions of Lillian Wald to the advancement of community health nursing, which of the following if stated by the class indicates that the discussion was effective?
- A) Establishment of family-centered nursing and outreach services in New York City at the turn

of the 20th century

B) Use of clean and safe nursing care practices to soldiers during the Crimean War in the 1850s

- C) Assistance to high-risk populations experiencing tropical diseases in Central America and the Caribbean in the late 1800s
- D) Creation of home nursing services in London, marking the beginning of district nursing in

the 1860s

Ans: A

Feedback:

Lillian Wald worked with immigrant families in the Lower East Side of New York City, providing home visits, a neighborhood center, and general sanitation improvement for families and health care services to children in schools. Florence Nightingale was responsible for providing clean and safe nursing care practices to soldiers during the Crimean War. Mary Seacole helped high-risk populations who experienced tropical diseases in Central America and the Caribbean. William Rathbone was responsible for establishing a visiting nurse service for the sick in London.

- 11. A group of nursing students are studying for an examination on influential nursing leaders involved in the advancement of community health nursing. The students demonstrate that they are prepared for the examination when they identify which person as the first community health nurse in the United States?
- A) Frances Root
- B) Mary Robinson
- C) Mary Seacole
- D) Reba Thelin Ans: A

Feedback:

In the United States, Frances Root was the first community health nurse who was hired by the Women's Branch of the New York Mission in 1877. Mary Robinson was the nurse who cared for William Rathbone's wife and was hired by Rathbone to visit the sick poor in their homes in England. Mary Seacole, the <Black Nightingale,= practiced Creole or Afro-Caribbean medicine in Jamaica and helped populations who experienced tropical diseases in Central America, Panama, and the Caribbean. Reba Thelin was a nurse hired by Johns Hopkins Hospital to visit the homes of tuberculosis clients in 1903.

- 12. Which of the following nurses openly defied a law that she saw as unjust and eventually resulted in the formation of The International Planned Parenthood Federation?
- A) Lillian Wald
- B) Florence Nightingale

- C) Margaret Sanger
- D) Mary Brewster Ans: C Feedback:

Margaret Sanger openly defied a law that she saw as unjust (the Comstock Act that prohibited the provision of any information on contraception to women). This defiance eventually resulted in the formation of The International Planned Parenthood Federation. During the same period that Lillian Wald and her contemporaries were working to alleviate the suffering caused by disease and poverty, Margaret Sanger began a different battle. Florence Nightingale wrote a series of papers on the need for <home missioners= and <health visitors= and endorsed the view that prevention was better than cure. Mary Brewster was a nurse and a friend of Lillian Wald who both together started the Henry Street Settlement.

- 13. The community health nurse is preparing a presentation for a group of nursing students about the societal influences on the development of community health nursing. Which factors should the nurse include that have influenced the growth of community health nursing? Select all that apply.
- A) Advances in the technology
- B) The recognition that one single agent could be considered a cause of illness
- C) Access to education being limited to the privileged few
- D) Continued increase in the number of women entering nursing because it is recognized as a

choice career for women and not men

E) Consumer demand for quality services coupled with community health nurses provision of holistic care

Ans: A, E

Feedback:

Many factors have influenced the growth of community health nursing, including advances in technology, progress in causal thinking (relating disease or illness to its cause and recognition that many factors might contribute to a disease or health disorder), and the consumer movement with consumers demanding quality services. Education is now widely available and is considered a basic right and necessity for a vital society.

Changing demographics and the role of women have influenced community health nursing; however, the number of women entering nursing has decreased.

- 14. Which of the following actions by the community health nurse exemplifies the societal influence of causality on the practice of community health nursing?
- A) Using computer-based education programs for client education
- B) Engaging in video conferencing to share research findings
- C) Identifying multiple factors associated with promoting wellness
- D) Developing a plan to address the rapid increase in older adult population

Ans: C

Feedback:

Causal thinking relates disease or illness to its cause and includes areas such as epidemiology; interactions among an agent, host, and environment; and recognition of multiple factors contributing to a disease, health disorder, or wellness. Using computer-based education programs and engaging in video conferencing are examples reflecting the advancement of technology. Developing a plan to address the rapid increase in the older adult population involves application of the change in demographics affecting community health nursing.

- 15. A community health nurse who is teaching a group of nursing students about the various societal influences on community health nursing is explaining the effects of the consumer movement. Which of the following student responses would lead the community health nurse to determine that the teaching was successful?
- A) Individuals are considered passive members of the health care team.
- B) Consumers are demanding more coordinated comprehensive care.
- C) People are expecting community health nurses to develop new programs.
- D) Consumers are identifying a greater need for care by a variety of care providers.

Ans: B

Feedback:

The consumer movement has led to changes in community health nursing. Consumers are demanding more humane, personalized health care, seeking more comprehensive coordinated care. They are viewed as active members of the health care team. The need to develop new programs is a response to the economic forces that have affected the practice of community health nursing.

Consumers desire more coordinated care, not care from a variety of care providers.

- 16. Which of the following most accurately reflects the response of community health nursing to economic forces?
- A) Decreased competition with other community health service providers
- B) Reduction in available programs and services C)

 Development of new services for generating revenue
- D) Switch to a more illness-oriented philosophy for service

Ans: C

Feedback:

Economic forces have led community health nursing to respond by developing new revenue-generating services to augment depleted budgets. Other responses include directly competing with other community health service providers and developing new programs and service emphases. Although some public health agencies have been drawn into more illnessoriented services, community health nursing continues to be resourceful in finding ways to foster the community's optimal health.

- 17. A prospective nursing student is interested in working in community health nursing after graduation. Which type of education would be most appropriate for this student to choose?
- A) Diploma program
- B) Associate degree
- C) Baccalaureate degree
- D) Graduate degree Ans: C

Feedback:

Community health nursing is a challenging specialty in nursing. The demands of this type of nursing require additional courses in liberal arts and science, along with courses in community health nursing practice as a student. The minimum preparation for community health nurses in many states is a baccalaureate degree. The diploma and associate degree level prepares students for basic nursing practice. Students can build on this basic knowledge by entering a

BSN completion program, which will prepare them to enter the specialty of community health nursing. In order to stay current and to build skills in this specialty, advanced courses or a graduate (masters) degree is needed.

- 18. A community health nurse desires to attain a tenure-track position at a local university to teach community health nursing. Which of the following would this nurse need?
- A) Certification
- B) Master's degree
- C) Doctoral degree
- D) Nurse practitioner license

Ans: C

Feedback:

A doctoral degree would be the required education needed to obtain a tenure-track teaching position at a university. Certification provides additional education for specialization and may result in a promotion or higher salary accompanied by additional responsibilities and opportunities. A master's degree can lead to management positions, private community health ownership, agency teaching, or research positions. Nurse practitioners can run well-child clinics and direct a school-based clinic if a school nurse. Advanced practice can open doors into leadership positions in community health nursing.

Chapter 4 Evidence-Based Practice and Ethics in Community/Public Health

- 1. A nursing instructor is preparing a teaching plan for a class comparing evidence-based practice and critical thinking. Which of the following would the instructor include?
- A) Evidence-based practice and critical thinking are polar opposites.
- B) Both involve problem clarification of central concepts.
- C) Interpretation of accumulated evidence is unique to evidence-based practice.
- D) Problem exploration is unique to evidence- based practice.

Ans: B

Feedback:

Evidence-based practice and critical thinking share commonalities including exploring a problem, addressing a purpose or goal, making assumptions, clarifying the problem around central concepts or indicators, accessing data, interpreting accumulated evidence, using reasoning, processing, defining, planning and documenting, acting on the problem, and evaluating, adjusting, generalizing, and applying to a broader problem set. In addition, critical thinking is an important component of evidence-based practice.

- 2. According to the Institute of Medicine's landmark report, The Future of Nursing, nurses should: Select all that apply.
- A) work independently from other health professionals to promote the profession of nursing.
- B) work collaboratively with other health professionals to promote health care. C) attempt to redesign health care.
- D) improve practices through evidence-based means.
- E) The Future of Nursing report does not express the importance of evidence-based nursing.

Ans: B, C, D Feedback:

The Future of Nursing highlights the need for nursing to work with other health professionals in <redesigning health care= by <conducting research= and improving practices through evidence-based means.

- 3. Which of the following statements about evidence-based practice has been identified by multiple reports over the past decade, such as To Err Is Human: Building a Safer Health System (2000), Crossing the Quality Chasm: A New Health System for the 21st Century (2001), and Priority Areas for National Action: Transforming Health Care Quality (2003)?
- A) We must continue to cling to <the way we've always done it.=
- B) We have spent billions of dollars each year researching new treatments and have translated that knowledge into clinical practice.
- C) We are not translating the knowledge that we are gaining into clinical practice.
- D) We have continued to spend more than a trillion dollars a year providing care and do translate that capacity into improved clinical practice.

Ans: C

Feedback:

To Err Is Human: Building a Safer Health System (2000), Crossing the Quality Chasm: A New Health System for the 21st Century (2001), and Priority Areas for National Action: