UNIVERSITY OF SWAZILAND
FACULTY OF HEALTH SCIENCES
DEPARTMENT OF COMMUNITY HEALTH NURSING SCIENCE
FINAL EXAMINATION
MAY 2017

TITLE OF PAPER: COMMUNITY HEALTH NURSING II

COURSE CODE: NUR 407

TIME ALLOWED: 2 HOURS

TOTAL MARKS: 75

INSTRUCTIONS:

1. READ ALL QUESTIONS AND INSTRUCTIONS VERY CAREFULLY
2. THERE ARE THREE QUESTIONS; ANSWER ALL OF THEM
3. EACH QUESTION CARRIES A TOTAL OF 25 MARKS
4. FIGURES IN BRACKETS INDICATE MARKS ALLOCATED TO A QUESTION OR PART OF A QUESTION
5. START EACH QUESTION ON A NEW PAGE
6. MAKE SURE THAT ALL YOUR ANSWERS ARE NUMBERED CORRECTLY
7. WRITE NEATLY AND CLEARLY

DO NOT OPEN THIS QUESTION PAPER UNTIL PERMISSION HAS BEEN GRANTED BY THE INVIGILATOR
SECTION A: Multiple Choice. For each of the questions, choose the most correct response. In your answer sheet, write the alphabet representing your chosen answer against the corresponding number, e.g. 80-E.

1.1 Community Health Nursing is concerned with the health of

a. Individuals, Families and the community
b. Vulnerable populations within communities
c. Both A & B

d. None of the above

1.2 The primary goal of Community Health Nursing is to:

a. Increase productivity of the people by providing them with services that will increase their level of health
b. Enhance the capacity of individuals, families and communities to cope with their health needs
c. Support and supplement the efforts of medical profession in the promotion of health and prevention of diseases
d. Contribute to national development through the promotion of individual, family and community welfare, focusing particularly on women and children.

1.3 The goal of nursing care in community health is to:

a. Promote wellness and independent functioning of the individuals
b. Prevent disease and injuries, and promote health and wellness at the community level
c. Treat diseases and injuries at community level
da. All of the above

1.4 All of the following are roles of a Community Health Nurse, except:

a. Advocating for clean drinking water in schools in his/her catchment area
b. Advising the community leadership on the importance of backyard gardens
c. Training teachers on personal hygiene at nearest schools
d. Paying medical fees for the elderly in his/her community

1.5 Examples of the micro-level environment in the socio-ecological theory include all of the following except:

a. Friends
b. Family
c. School
d. Community
1.6 Quality Assurance is an important part of health delivery system. Quality assurance refers to:

a. A systematic approach to monitoring, assessing and improving the quality of health services on a continuous basis and within available resources.
b. The capturing, collecting, analysing, interpreting and use of health data to inform health decisions at every level of the health system.
c. Ensuring that resources required for provision of health services are made available efficiently timely and equitably.
d. All of the above.

1.7 According to Donabedian’s model the three methods for evaluating quality of care include all of the following except:

a. Structure
b. Process
c. Output
d. Outcome

1.8 In Quality Assurance, efficiency refers to:

a. Using minimal cost as possible to achieve planned goals
b. Using all available resources to achieve planned goals
c. Ensuring that all planned goals are achieved regardless of costs
d. Ensuring that available resources are tailored to limited and achievable goals

1.9 When a community health nurse determines whether resources were maximised in implementing a health promotion campaign, she is evaluating:

a. Adequacy
b. Efficiency
c. Appropriateness
d. Effectiveness

1.10 When an Occupational Health Nurse employs ergonomic principles, she is performing which of her roles?

a. Health educator
b. Environmental manager
c. Health care provider
d. Health care coordinator

1.11 Mycobacterium Tubercle was identified by:

a. Robert Koch
b. Louis Pasteur
c. Van Leeuwenhoek
d. Luc Montagnier
1.12 Which of the following is *not true* about quality assurance?

a. Relates to staffing norms and professional qualifications  
b. Relates to availability of and knowledge about built structures, policies, and procedures in practice areas  
c. Is about continuous research for evidence informed practice  
d. Is about learning from and doing what predecessors did in managing clients

1.13 Which of the following tasks should the community clinic nurse perform to prevent further spread of infection?

a. Develop a written policy and plan for prevention of the nosocomial transmission of TB disease in their facility  
b. Develop TB infection control policies to ensure that patients suspected of having infectious TB disease are isolated  
c. Report any patient with a suspected or confirmed diagnosis of TB disease to the regional referral centre promptly  
d. All of the above

1.14 Nurse B is a new graduate who has responded to an advert for a nursing position in newly opened asbestos mine at Bulawayo. Part of the application process requires that Nurse B undergoes a medical examination. In occupational health, this is called:

a. Pre-employment screening  
b. Pre-placement screening  
c. Routine medical screening  
d. Occupational screening

1.15 The purpose of the medical examination in question 1.14 is to:

a. Identify physical and psychological problems which may affect the ability of the candidate to carry out the proposed employment in a safe and effective manner  
b. To provide a baseline health profile for Occupational Health and Safety Office and other statutory health surveillance to measure and detect any health changes during the course of employment  
c. Both A and B  
d. None of the above

[1 mark each= 15 marks]
SECTION B: True or False. State whether following statements are true or false. Each correct answer carries a total of half (1/2) mark.

1. Clients presenting with fever with chill and rigor should not have their blood slide tested for malaria parasite if they are not from malaria areas.
2. Client satisfaction is an important variable when measuring quality of care.
3. It is the responsibility of the TB program to educate health-care providers (both public and private), community members, public health officials, and policy makers on TB prevention, management and control.
4. Surveillance data and information management systems should be a priority for all TB programs.
5. Perder’s model of Health Promotion is an improvement of the Health Belief Model.
6. It is important to get the buy in of employers, employees but not the union when establishing an Occupational health service in the workplace.
7. The primary responsibility of an occupational health nurse is to promote workplace safety and prevent work-related illnesses and injuries.
8. Occupational health is only relevant in mines, big industries and construction companies and not office based establishments such as banks or government ministries.
9. The Health Belief Model proposes that a person’s health-related behavior depends on the person’s perception of four critical areas: the severity of a potential illness, the person’s susceptibility to that illness, the benefits of taking a preventive action, and the barrier to taking that action.
10. MDR-TB refers to TB that is resistant to one anti-TB drug, usually Rifampicin while XDR-TB refers to TB that is resistant to two or more anti-TB drugs, one of which is Rifampicin.

[1/2 mark each= 5 marks]

SECTION C

Swaziland has the leading adult population incidence and prevalence of HIV. However the country is making significant effort in reducing the burden of the epidemic. State and briefly explain five strategies implemented by the country to reduce incidence and prevalence of HIV.

[5 marks]
QUESTION 2
Swaziland is faced with high burden of Pulmonary Tuberculosis (PTB). Prompt diagnosis of active pulmonary TB is a priority for TB control, both for treating the individual and for public health intervention to reduce further spread in the community. Using several community based interventions, the National TB Control Programme (NTCP) is working around the clock to reduce the incidence of PTB.

a. State three ways in which PTB is diagnosed in the country including one advantage and disadvantage of each. [5 marks]

b. Discuss the strategic interventions used by the NTCP in prevention and control of PTB at the community level. [10 marks]

c. During his presidential term, Mr. Mbeki, a former President of the Republic of South Africa, allegedly stated that “AIDS was caused by poverty”, a statement that attracted local and global criticism by scientists and activists who blamed his anti-Antiretroviral policies for the preventable deaths of between 343,000 and 365,000 people from AIDS. According to recent arguments on print and electronic media, there are researchers who are in support of Mbeki’s position on the contributory role of poverty on HIV and AIDS. Use the Syndemics Theory to support or dispute Mbeki’s statement. [10 marks]

QUESTION 3
While pursuing your nursing duties in the clinic, a client walks in and reports to you that her family is composed of seven members: two obese parents, one infant on formula, one school-aged child, one teenager and two grandparents. The grandparents are on moderate food restrictions that reduce sugar and sodium.

a) How would you conduct an objective assessment to ascertain the nutritional status of the parents? [2 marks]

b) Write one potential nutritional diagnosis pertaining to the infant. [3 marks]

c) Describe endeavours that the obese parents would do towards in order to meet nutritional requirements of the school-aged child and grandparents. [10 marks]

d) The family in the given scenario has a teenager. During the teenage stage, there is unique development in personality and opinions, therefore nutritional interventions may need the 5 As intervention model. Briefly discuss what is entailed in the model. [10 marks]