

Chapter 2: Settings and Models for Nursing Care

1. Which of the following describes the role of the nurse as defined by Florence Nightingale?

- A. Helping people to carry out activities that contribute to health and recovery
- B. Putting clients in the best condition for nature to act upon them
- C. Diagnosing and treating human responses to actual or potential health problems
- D. Promoting a caring relationship that facilitates health and healing

ANS: B

Rationale: Florence Nightingale (1859) described the role of the nurse as putting "the patient in the best condition for nature to act upon him." Virginia Henderson envisioned the nurse's role as helping people (sick or well) to carry out activities that contribute to health, recovery, or a peaceful death. The American Nurses Association (ANA) traditionally defined nursing as "the diagnosis and treatment of human responses to actual or potential health problems." In response to an increased emphasis on the science of care, the ANA now acknowledges "promotion of a caring relationship that facilitates health and healing" as one of the four essential features of contemporary nursing practice.

PTS: 1 REF: p. 13, Definitions of Nursing

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand NOT: Multiple Choice

2. Which setting has been the traditional site for the nursing work force?

- A. Industrial environments
- B. Inpatient units
- C. Same-day surgery units
- D. Clinics

ANS: B

Rationale: Although hospitals include all levels of outpatient areas (e.g., industrial environments, clinics, same-day surgery units, related diagnostic departments), inpatient units have been the traditional site for much of the nursing work force.

PTS: 1 REF: p. 14, Settings and Types of Nursing Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand NOT: Multiple Choice

3. Which type of care is used for clients with terminal illness who have a life expectancy of less than 6 months?

- A. Hospice care
- B. Ambulatory care
- C. Skilled nursing care
- D. Intermediate care

ANS: A

Rationale: Hospices provide care for clients with terminal illness whose life expectancy is less than 6 months. Ambulatory care is also called outpatient care. Skilled nursing care facilities provide skilled nursing and rehabilitative care to people who have the potential to regain function but need skilled observation and nursing care during an acute illness. Intermediate care facilities are nursing homes that provide custodial care for people who cannot care for themselves because of mental or physical disabilities.

PTS: 1 REF: p. 15, Hospice Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand NOT: Multiple Choice

4. Freestanding apartments are an example of which type of alternative healthcare setting?

- A. Skilled nursing care
- B. Assisted living

C. Congregate housing

D. Boarding homes

ANS: C

Rationale: Congregate housing provides independent living or minimal assistance for seniors or disabled adults. Skilled nursing care facilities provide skilled nursing and rehabilitative care to people who have the potential to regain function but need skilled observation and nursing care during an acute illness. Assisted living facilities provide care to residents who need assistance with up to three activities of daily living. Boarding homes are usually small homes with individual rooms where residents pay for room and board and minimal nursing services.

PTS: 1 REF: p. 17, Alternative Health Care Settings

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Remember NOT: Multiple Choice

5. Which of the following describes the goal of alternative care facilities?

- A. An RN and one or more assistive personnel care for a group of clients.
- B. An RN assumes all care for a small group of clients.
- C. There is 24-hour accountability by an RN.
- D. The facility provides the least restrictive living arrangement.

ANS: D

Rationale: The goal of alternative care facilities is to provide the least restrictive living arrangement while maintaining safety and quality. Patient-focused care uses an RN partnered with one or more assistive personnel to care for a group of clients. Total care refers to assignments in which a nurse assumes all the care for a small group of clients. In primary nursing, an RN assumes 24-hour accountability for the client's care and has total responsibility for the nursing care of assigned clients during the shift.

PTS: 1 REF: p. 17, Alternative Health Care Settings

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply NOT: Multiple Choice

6. Which nursing theorist stated that clients are open systems in constant interaction with their environment?

- A. Florence Nightingale
- B. Virginia Henderson
- C. Imogene King
- D. Dorothea Orem

ANS: C

Rationale: Imogene King stated that clients are open systems in constant interaction with their environment. Florence Nightingale described the role of the nurse as putting "the patient in the best condition for nature to act upon him." Virginia Henderson envisioned the nurse's role as helping people (sick or well) to carry out activities contributing to health, recovery, or a peaceful death that they would do for themselves if they had the necessary strength, will, or knowledge. Dorothea Orem was a proponent of the self-care deficit theory.

PTS: 1 REF: p. 14, Table 2-1

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply NOT: Multiple Choice

7. Veterans' hospitals are an example of which type of ownership?

- A. For-profit
- B. Government-owned
- C. Proprietary
- D. Nonprofit

ANS: B

Rationale: Veterans' hospitals are an example of government-owned healthcare institutions. For-profit agencies (proprietary) are owned and operated by corporate groups with investors and stockholders. Non-profit institutions include universities and religious organizations.

PTS: 1 REF: p. 15, Table 2-3

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand NOT: Multiple Choice

8. A religious organization is an example of this type of ownership?

- A. Government-owned
- B. Proprietary agency
- C. Nonprofit agency
- D. Public facility

ANS: C

Rationale: Nonprofit institutions include universities and religious organizations. Veterans' hospitals are an example of government-owned or public healthcare institutions, which receive at least some tax support. For-profit agencies (proprietary) are owned and operated by corporate groups with investors and stockholders.

PTS: 1 REF: p. 15, Table 2-3

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand NOT: Multiple Choice

9. Which type of length of stay includes emergency department visits?

- A. Long-term care
- B. Acute care
- C. Short stay
- D. In-and-out care

ANS: D

Rationale: An example of in-and-out care is an emergency department visit. Long-term care provides care to residents for the remainder of their lives. Acute care occurs in hospitals where clients stay more than 24 hours but less than 30 days. Short stay provides care to clients who suffer from acute conditions or need treatments that entail less than 24 hours of care and monitoring.

PTS: 1 REF: p. 14, Table 2-2

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply NOT: Multiple Choice

10. A student nurse asks the nursing instructor, "What will my role as a nurse encompass after I graduate?" What is the best response by the nursing instructor?

- A. "You will take care of clients who are ill in a hospital or long-term care facility."
- B. "You will care for individuals and families and play a role in health education, illness prevention, and promotion."
- C. "You will care for a variety of clients of all ages when they are ill."
- D. "It will all depend on where you want to work when you graduate. Nurses do different things in healthcare."

ANS: B

Rationale: Nursing is concerned with caring for individuals, families, or groups. Nurses not only care for clients when they are ill but also play a significant role in health education, illness prevention, and promotion. Nurses attend to client needs related to: hygiene; activity; diet; the environment; medical treatment; and physical, emotional, and spiritual comfort. Therefore, nurses care for clients in a variety of settings, not just hospitals or long-term care facilities. Though nurses may choose to specialize in a certain area of healthcare, all these areas involve health education and promotion and illness prevention.

PTS: 1 REF: p. 13, Nursing Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Teaching/Learning

BLM: Cognitive Level: Apply NOT: Multiple Choice

11. The LPN is caring for clients at the hospital's medical unit. What role does the LPN/LVN have in the care of clients on this unit?

- A. The LPN/LVN may provide care to clients who have a well-defined, common problem.
- B. The LPN/LVN may manage and coordinate the care of a group of clients.
- C. The LPN/LVN has a high level of competency in assessment skills.
- D. The LPN/LVN encourages clients and family members to develop self-care skills.

ANS: A

Rationale: The LPN/LVN provides care to clients under the direction of a registered nurse (RN), advanced practice nurse (APRN), or physician in a structured healthcare setting. LPN/LVNs care for clients with well-defined, common problems that often require a high level of technical competency and expertise. The other answers are all roles that an RN would have.

PTS: 1 REF: p. 14, Nursing Roles

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Apply NOT: Multiple Choice

12. An LPN says to an RN, "I don't understand why I get paid less, yet we do the same thing here at work." What role does the RN have in the healthcare setting that the LPN does not?

- A. The RN only cares for clients with well-defined, common problems.
- B. The RN's role is more complex and involves management and coordination of client care.
- C. The RN is responsible for everything that the LPN does in the healthcare

setting.

D. The RN is the only provider that cares for clients that require competency and expertise.

ANS: B

Rationale: The RN's role is more complex, involving the management and coordination of all the care provided to a group of clients. LPN/LVNs care for clients with well-defined, common problems that often require a high level of technical competency and expertise. LPNs are responsible for their own actions and must work within their scope of practice.

PTS: 1 REF: p. 2, Nursing Roles

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Apply NOT: Multiple Choice

13. The charge nurse is making assignments for a group of clients on a medical unit. When reviewing the acuity of the clients, the charge nurse assigns the RN to the clients with higher acuity levels. Why would the charge nurse assign the RN to the clients with a higher acuity?

- A. LPNs do not understand how to care for clients with complex disorders.
- B. Assigning an LPN would allow them to provide care out of their scope of practice.
- C. Higher acuity clients may request the services of an RN versus other care providers.
- D. A higher acuity client requires a greater need for highly skilled care.

ANS: D

Rationale: Generally, higher acuity requires a greater need for highly skilled care. Clients with complicated or high-risk surgery, massive trauma, or critical illness will be cared for in an acute care hospital, where a high level of professional, skilled, and technological care is available. RNs are instrumental in caring for these clients. LPNs

may understand how to care for clients with complex disorders, but RNs are instrumental in the client care. Clients generally do not request care by a specific provider; nurses with different levels of education perform various care activities.

PTS: 1 REF: p. 15, Acute Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Apply NOT: Multiple Choice

14. A client who is receiving respiratory support with a tracheostomy and mechanical ventilation after a stroke is being discharged from the acute care facility. Family members state that they will not be able to care for the client at home to provide the care that is required. What type of care may this client be a candidate for after discharge?

- A. Long-term acute care
- B. Subacute care
- C. Intermediate care facility
- D. Rehabilitation care

ANS: A

Rationale: Clients who require ventilator support or who have other conditions that are potentially unstable but do not have rapid changes may receive care in a long-term acute care facility. Subacute care refers to care that is more intense than traditional long-term care but less intense than acute inpatient care. Intermediate care facilities (ICFs) are nursing homes that provide custodial care for people who cannot care for themselves because of mental or physical disabilities. Rehabilitation centers provide physical and occupational therapy to clients and families to help individuals regain as much independence with ADLs as possible.

PTS: 1 REF: p. 15, Long-Term Acute Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply NOT: Multiple Choice

15. A client is going to be in subacute care for approximately 30 days. The client will require frequent assessments and periodic review of the client's progress. What role will the registered nurse have in the care of this client?

- A. The RN will provide direct care for the client.
- B. The RN will ensure that the client eats 100% of the meals.
- C. The RN will order the various treatments for the client.
- D. The RN will coordinate the client's care.

ANS: D

Rationale: RNs coordinate clients' care, and LPN/LVNs provide and oversee care provided by unlicensed assistive personnel (UAPs). The RN does not generally provide the direct care, and this would include overseeing meals. It is beyond the scope of practice for RNs to order treatments and medications.

PTS: 1 REF: p. 15, Subacute Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Apply NOT: Multiple Choice

16. An older adult client is being transferred to another facility in order to continue physical therapy after having a total right hip replacement. What type of facility will provide skilled nursing and rehabilitative care for this client who will go home after the rehabilitation?

- A. Acute care facility
- B. Long-term acute care
- C. Skilled nursing care
- D. Intermediate care facility

ANS: C

Rationale: Skilled nursing care facilities provide skilled nursing and rehabilitative care to people who have the potential to regain function but need skilled observation and

nursing care during an acute illness. Acute care facilities are for clients who have a higher level of acuity. Long-term acute care are for clients who require long-term wound care of ventilator support or who have other conditions that are potentially unstable but do not have rapid changes. Intermediate care facilities provide custodial care for people who cannot care for themselves because of mental or physical disabilities.

PTS: 1 REF: p. 15, Skilled Nursing Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Apply NOT: Multiple Choice

17. An LPN just received a license to practice and applied for a position at a skilled nursing care facility. While being interviewed, the LPN asks what to expect from the role at the facility. What is the best answer by the interviewer?

- A. "You will be organizing and coordinating the care of the clients."
- B. "You will be participating in the care of the clients."
- C. "You will be in charge of a unit and have 24-hour accountability."
- D. "You will be responsible for developing and implementing a plan of care for the clients."

ANS: B

Rationale: An RN must be in charge of client's care, although other healthcare providers, particularly LPN/LVNs, participate in their care. Organizing and coordinating client care, being in charge of a unit with 24-hour accountability, and developing and implementing a plan of care for the clients are under the scope of practice of an RN.

PTS: 1 REF: p. 15, Skilled Nursing Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Analyze NOT: Multiple Choice

18. The caregiver of a client with mental disabilities has recently passed away. The client is unable to perform self-care at home. What facility would best meet the needs of this client?

- A. Acute care facility
- B. Rehabilitation care
- C. Intermediate care facility
- D. Ambulatory care

ANS: C

Rationale: Intermediate care facilities (ICFs) are nursing homes that provide custodial care for people who cannot care for themselves because of mental or physical disabilities. Clients must meet specific criteria related to an inability to meet their own activities of daily living (ADL). Rehabilitation centers provide physical and occupational therapy to clients and families to help individuals regain as much independence with ADLs as possible. Acute care facilities care for clients with a higher acuity level. Ambulatory care is also referred to as outpatient care and is a short stay.

PTS: 1 REF: p. 15, Intermediate Care Facilities

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Analyze NOT: Multiple Choice

19. A client experienced a stroke approximately 2 weeks previously and has residual left side hemiparesis. What facility would best meet the needs of this client in order to help regain independence with activities of daily living?

- A. Rehabilitation care
- B. Hospice care
- C. Ambulatory care
- D. Acute care

ANS: A

Rationale: Rehabilitation care provides physical and occupational therapy to clients and

families to help individuals regain as much independence with ADLs as possible. Hospices provide care for clients diagnosed with a terminal illness whose life expectancy is fewer than 6 months. Ambulatory care is short-term outpatient care. Acute care facilities are facilities that provide care to clients of higher acuity.

PTS: 1 REF: p. 15, Rehabilitation Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Analyze NOT: Multiple Choice

20. A client has end-stage chronic obstructive pulmonary disease (COPD) and is terminally ill. The family wants the client to spend their last days in a facility that will be able to keep the client comfortable and control their severe dyspnea. What facility will meet the needs of the client and family?

- A. Rehabilitation care
- B. Hospice care
- C. Intermediate care facilities
- D. Ambulatory care

ANS: B

Rationale: Hospice provides care for clients diagnosed with a terminal illness whose life expectancy is fewer than 6 months. Hospices allow terminally ill clients to live as fully as possible while managing pain, discomfort, and other symptoms. Rehabilitation centers provide physical and occupational therapy to clients and families to help individuals regain as much independence with ADLs as possible. Intermediate care facilities (ICFs) are nursing homes that provide custodial care for people who cannot care for themselves because of mental or physical disabilities. Ambulatory care is also outpatient care.

PTS: 1 REF: p. 15, Hospice Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Analyze NOT: Multiple Choice

21. A client wishes to be discharged to home and not be admitted to a long-term care facility. The client requires daily wound care for a large sacral pressure ulcer and home health nurses will be consulted. What will be the goal of the home health nurses in the care of this client?

- A. to have the client admitted to a long-term care facility if the ulcer does not heal in a timely manner
- B. to have the client come to the home care agency daily for dressing changes
- C. to continue to see the client daily for dressing changes until the wound heals
- D. to encourage family members to develop self-care skills and perform dressing changes

ANS: D

Rationale: The RN encourages clients and family members to develop self-care skills, with support from community resources. The home health nurse's goal is to allow the client to be cared for in their home and not in a long-term care facility if that is not what the client wishes. The client's condition does not enable self-care. The goal for the family will be to perform dressing changes in the home and the nurse will continue to monitor the condition of the wound.

PTS: 1 REF: p. 16, Home Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2

KEY: Integrated Process: Communication and Documentation | Integrated Process: Nursing Process BLM: Cognitive Level: Analyze NOT: Multiple Choice

22. A client is living in congregate housing and expresses disliking living there to the LPN. When the nurse asks what is making the client unhappy, the client states, "It is a nice place but I am unable to do anything because I hardly have money for my medicines or food." What is an issue related to congregate housing?

- A. Residents may find that congregate housing is unaffordable.
- B. Residents may not have any other resources to purchase extra services or goods.

C. Residents are not assured of appropriate housing and may be evicted at any time.

D. Residents must be financially able to participate in outside activities.

ANS: B

Rationale: Congregate housing is affordable, but residents may not have any other resources to purchase extra services or goods. They are assured of appropriate housing but may lack the resources, ability, or opportunity to participate in outside activities.

PTS: 1 REF: p. 17, Alternative Health Care Settings

NAT: Client Needs: Psychosocial Integrity | Client Needs: Safe, Effective Care

Environment: Safety and Infection Control TOP: Chapter: 2

KEY: Integrated Process: Caring BLM: Cognitive Level: Apply

NOT: Multiple Choice

23. A client who is mentally disabled is working at an adult activity center. The client is unable to live independently, and the family member they are living with can no longer assist with supervised care. What option for living arrangements would be ideal for this person?

- A. Congregate housing
- B. Boarding home
- C. Long-term acute care facility
- D. Acute care facility

ANS: B

Rationale: Boarding homes usually are small homes with individual rooms where residents pay for room and board and minimal nursing services. Residents often share rooms, have a common dining area for all meals, and also oversee employment for disabled adults and provide a stable environment for those who cannot live independently. Congregate housing provides independent living for seniors or disabled adults who need minimal to no assistance. Long-term care facilities are for clients who

require long-term wound care or ventilator support or who have other conditions that are potentially unstable but do not have rapid changes. Acute care facilities are for those clients who are of high illness acuity.

PTS: 1

REF: pp. 14-15, Settings and Types of Nursing Care | p. 17, Alternative Health Care Settings

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Caring

BLM: Cognitive Level: Apply NOT: Multiple Choice

24. A home care nurse provides care to a client three times a week. The client's family member lives in the home and is employed full time. The family member believes that the client would benefit greatly from care 24 hours a day but wants the client to remain at home. Which is the **best** action for the nurse to take to meet the family member's goal and to ensure the client receives the care required?

- A. Advocate for the client and the family member to receive additional services as needed.
- B. Encourage the family member to consider placement in a skilled nursing facility.
- C. Teach the family member to provide care to the client during the times the nurse is not in the home.
- D. Recommend enrolling the client in an adult day care center.

ANS: A

Rationale: The best action for the nurse to take to ensure the client receives needed care and to meet the family member's goals for the client is to advocate for the family to receive whatever additional services are required. A skilled nursing facility will provide 24-hour care for the client and will assist in ADLs but will not allow the client to remain at home as the family member wants. An adult day care center allows the client to remain at home but does not provide 24-hour care and can only assist with ADLs during the time frame the client is at the center. Teaching the family member to perform procedures, administer medications, and provide other care would not be the

best options because the family member is employed full-time.

PTS: 1 REF: p. 16, Functions of the Home Health Care Nurse

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Analyze NOT: Multiple Choice

25. The LPN has been assigned to a medical floor and to do all of the dressing changes and other treatments. The RN will make the rounds with the physicians, transcribe orders, and administer all of the IV medications. Another LPN will administer medications. What type of nursing is this group providing?

- A. Team nursing
- B. Total client care
- C. Functional nursing
- D. Primary care nursing

ANS: C

Rationale: Functional nursing is a task-oriented method, and distinct duties are assigned to specific personnel. Total client care refers to assignments in which a nurse assumes all the care for a small group of clients. In team nursing, teams made up of an RN team leader, other RNs, LPN/LVNs, and nursing assistants provide care to a group of clients. Primary care nursing is when the RN assumes 24-hour accountability for the client's care and has total responsibility for the nursing care of assigned clients during a shift.

PTS: 1 REF: p. 17, Functional Nursing

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Apply NOT: Multiple Choice

26. The LPN is part of a group of nurses that has an RN team leader as well as another LPN and two nursing assistants who will be providing care to a group of clients. What type of nursing method is this considered?

- A. Functional nursing
- B. Total client care
- C. Case method
- D. Team nursing

ANS: D

Rationale: Team nursing is composed of an RN team leader, other RNs, LPN/LVNs, and nursing assistants who provide care to a group of clients. Functional nursing is a task-oriented method where everyone in the group is assigned to specific tasks. Case method is the same as private duty nursing. Total client care refers to assignments in which a nurse assumes all the care for a small group of clients.

PTS: 1 REF: p. 18, Team Nursing

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Apply NOT: Multiple Choice

27. The RN is assuming all of the care for a small group of clients, and an LPN is assigned to another group of clients with a lower acuity. What type of nursing is this considered?

- A. Total client care
- B. Team nursing
- C. Functional nursing
- D. Primary care nursing

ANS: A

Rationale: Total client care refers to assignments in which a nurse assumes all the care for a small group of clients. Team nursing are teams made up of an RN team leader, other RNs, LPN/LVNs, and nursing assistants, and they provide care to a group of clients. Functional nursing is a task-oriented method of nursing. Primary care nursing is when an RN assumes 24-hour accountability for the client's care and has total responsibility for the nursing care of assigned clients during a shift.

PTS: 1 REF: pp. 17-18, Models for Nursing Care Delivery

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Apply NOT: Multiple Choice

28. An RN has been assigned to care for three clients on the medical unit and will assume 24-hour accountability for those clients' care. When the nurse goes off duty, the plan of care will be continued by a secondary nurse. What type of nursing model is this considered?

- A. Team nursing
- B. Case method
- C. Functional nursing
- D. Primary care nursing

ANS: D

Rationale: In primary care nursing, the RN assumes 24-hour accountability for the client's care and has total responsibility for the nursing care of assigned clients during a shift. Team nursing is made up of an RN team leader, other RNs, LPN/LVNs, and nursing assistants who provide care to a group of clients. The case method is the same as a private duty nurse. In functional nursing, distinct duties are assigned to specific personnel.

PTS: 1 REF: p. 18, Primary Care Nursing

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Apply NOT: Multiple Choice

29. The nurse manager of a telemetry unit is considering changing from a team model of nursing to a primary nursing model. When considering this decision, what advantage does the manager understand the primary nursing model brings to nursing care?

- A. The RN will partner with one or more assistive personnel to care for a group of clients.

- B. Caregivers see to all their client's needs, thus providing holistic and comprehensive care.
- C. Tasks are divided, and clients see several people during the shift.
- D. The RN will be the team leader and direct the care that is provided by all of the other personnel.

ANS: B

Rationale: In primary nursing, an RN assumes 24-hour accountability for the client's care and has total responsibility. An advantage is that the client has a caregiver who provides holistic and comprehensive care. An RN partnering with one or more assistive personnel when caring for a group of clients is an example of a client care-focused model. When tasks are divided with clients seeing several people during a shift, this is considered a total care model. An RN serving as a team leader directing the care provided by other personnel constitutes a team approach.

PTS: 1 REF: p. 18, Primary Care Nursing

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply NOT: Multiple Choice

30. A hospital unit has been using a functional nursing model for delivery of care for several years. The manager has been discussing with the staff the idea of a change to total care because functional nursing has some disadvantages to the clients. What disadvantage is the manager referring to?

- A. It is expensive because it only uses RNs.
- B. Some nurses work harder than others to provide care.
- C. It fragments care and is confusing for the clients.
- D. Nurses are accountable for the client's care 24 hours per day.

ANS: C

Rationale: Although efficient, functional nursing fragments care and is confusing for clients. Primary nursing is expensive because it uses RNs only. Nurses are designated

certain tasks if functional nursing is employed, so the care is divided. Nurses are accountable for client care in a primary nursing model.

PTS: 1 REF: pp. 17-18, Models for Nursing Care Delivery

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Apply NOT: Multiple Choice

31. A client is admitted to an acute care facility after having a stroke. The client will require a variety of healthcare services throughout the hospital stay as well as coordination of care prior to discharge. What referral would be a priority for overseeing the client's care?

- A. Case management
- B. Physical therapy
- C. Occupational therapy
- D. Dietary services

ANS: A

Rationale: The person responsible for overseeing the client's care, usually an RN with a bachelor's or master's degree or another highly experienced health professional, is called the case manager. Physical therapy, occupational therapy, and dietary services are all important care disciplines but do not encompass all of the client's needs.

PTS: 1 REF: p. 18, Case Management

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Apply NOT: Multiple Choice

32. A client in an acute care facility is assigned a case manager to oversee and coordinate care. What important function does a case manager have?

- A. Provide early, thorough discharge planning.
- B. Make sure the client is administered medications.
- C. Provide care to the client who is terminally ill and has less than 6 months to

live.

D. Make home visits to see that the client is taken care of after discharge.

ANS: A

Rationale: An important function of case managers is to provide early, thorough discharge planning. The case manager is not responsible for the administration of medications. Hospice care provides care to the client who is terminally ill. The case manager oversees the care of the clients while they are hospitalized. Referrals to community agencies and home healthcare will be made for home visits.

PTS: 1 REF: p. 19, Case Management

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Understand NOT: Multiple Choice

33. A client arrives at the physician's clinic in order to receive care for a cough and fever. What type of healthcare institute classification is this client attending?

A. Short stay

B. Acute care

C. Long-term care

D. In-and-out care

ANS: D

Rationale: In in-and-out care, contact with the client is measured in minutes versus hours. Typical examples are office visits, emergency department visits, and therapy sessions with in-and-out care. Short stays provides care to clients who suffer from acute conditions or need treatments that require fewer than 24 hours of care and monitoring. Long-term care provides care to residents for the remainder of their lives. Acute care traditionally occurs in hospitals where clients stay more than 24 hours.

PTS: 1 REF: p. 14, Table 2-2

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Understand NOT: Multiple Choice

34. A client will be discharged from an acute care facility but will require home health services to assess the need for assistive devices to aid in activities of daily living and identify issues related to fine motor movements and muscle retraining after a stroke.

What referral will home health services make?

- A. Physical therapy
- B. Homemakers
- C. Occupational therapy
- D. Speech therapy

ANS: C

Rationale: Occupational therapy will assess the need for assistive devices to aid in activities of daily living and identify issues related to fine motor movements and muscle retraining. Physical therapy will assess the client's mobility after orthopedic surgery, injury, or stroke. Homemaker services will clean, do laundry, and shop for groceries. Speech therapy will provide rehabilitation to clients with speech or swallowing disorders.

PTS: 1 REF: p. 16, Table 2-4

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

TOP: Chapter: 2 KEY: Integrated Process: Communication and Documentation

BLM: Cognitive Level: Understand NOT: Multiple Choice