

Spector *Cultural Diversity in Health and Illness*, 8/E

Chapter 1

Question 1

Type: MCSA

Which action would a hospital administrator take to meet the cultural and linguistic needs of Spanish-speaking community members?

- 1.
2. Ensure that all health care workers speak Spanish.
3. Ensure that all signage is posted in Spanish as well as English.
4. Ensure health services are in varying locations.

Correct Answer: 1

Rationale 1: Hiring professional staff from different Spanish-speaking countries would create a foundation for the variations in the language and culture of the different countries and aid in providing cultural and linguistic competence to meet the health needs of this population.

Rationale 2: Ensuring that all health care workers speak Spanish would benefit this population, but does not necessarily guarantee that cultural and linguistic competence would result.

Rationale 3: Spanish signage would aid with client understanding, but this action also assumes that all of the client population is literate.

Rationale 4: Ensuring that health services are in varying locations meets the needs of many populations but is not necessarily a component of linguistic and cultural competence.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO02 - Describe the National Standards for Culturally and Linguistically Appropriate Services in Health Care.

Question 2

Type: MCSA

On which criterion would the Human Resources manager focus when identifying interpreters to support the care of patients with limited English proficiency?

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1. Proficient in health language terminology
2. Availability of family members
3. Be of the same ethnic background of the patients
4. Be on 24-hour call

Correct Answer: 1

Rationale 1: Interpreters providing language assistance must be proficient in health language terminology in order to provide accurate information to a patient in their own language.

Rationale 2: Family members are not to be used for language assistance or interpretation unless absolutely necessary or on request by the patient, as they may not be able to provide objective impartial information.

Rationale 3: While it is helpful to have the same ethnic background of the patients for whom language assistance is provided, it is not necessary.

Rationale 4: An interpreter may not be able to be on 24-hour call, but back-up mechanisms should be in place to provide language assistance when a designated interpreter is not available.

Global Rationale:

Cognitive Level: Applying

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Assessment

Learning Outcome: LO02 - Describe the National Standards for Culturally and Linguistically Appropriate Services in Health Care.

Question 3

Type: MCMA

A health care organization is incorporating culturally and linguistically appropriate services into the strategic plan. In which areas of the plan will these services be reflected?

Standard Text: Select all that apply.

1. Goals
2. Policies
3. Operational plans
4. Management accountability

5. Internal audits

Correct Answer: 1,2,3,4

Rationale 1: To support cultural and linguistically appropriate services, a health care organization needs to outline clear goals in the strategic plan.

Rationale 2: To support cultural and linguistically appropriate services, a health care organization needs to outline policies within the strategic plan.

Rationale 3: A health care organization needs to outline operational plans to support cultural and linguistically appropriate services within the strategic plan.

Rationale 4: A health care organization needs to identify management accountability for cultural and linguistically appropriate services within the strategic plan.

Rationale 5: Internal audits are used to evaluate culturally and linguistically appropriate services within a health care organization.

Global Rationale:

Cognitive Level: Applying

Client Need: Health Promotion and Maintenance

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO02 - Describe the National Standards for Culturally and Linguistically Appropriate Services in Health Care.

Question 4

Type: MCSA

Why does a health care organization maintain a current demographic, cultural, and epidemiological profile of the patients receiving care in the hospital?

1. Plan and implement culturally and linguistically appropriate services
2. Ensure grievances are resolved
3. Plan for culturally appropriate continuing education for the staff
4. Develop partnerships with community members

Correct Answer: 1

Rationale 1: Health care organizations should maintain a current demographic, cultural, and epidemiological profile of the community to accurately plan for and implement services that respond to the cultural and linguistic characteristics of the service area.

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Rationale 2: Maintaining a current demographic, cultural, and epidemiological profile of the patients receiving care in the hospital does not ensure that grievances are resolved. The health care organization must ensure that the grievance process is culturally and linguistically sensitive and capable of resolving cross-cultural conflicts.

Rationale 3: Maintaining a current demographic, cultural, and epidemiological profile of the patients receiving care in the hospital is not done to plan for culturally appropriate continuing education for staff. Planning for ongoing education and training in culturally and linguistically appropriate services would be based on the patient demographic but not on the epidemiological profile of the community.

Rationale 4: Maintaining a current demographic, cultural, and epidemiological profile of the patients receiving care in the hospital is not done to develop partnerships with community members. Partnerships with communities are used to facilitate community and patient involvement when designing and implementing culturally and linguistically appropriate service-related activities.

Global Rationale:

Cognitive Level: Analyzing

Client Need: Health Promotion and Maintenance

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Evaluation

Learning Outcome: LO02 - Describe the National Standards for Culturally and Linguistically Appropriate Services in Health Care.

Question 5

Type: MCSA

Which behavior of a health care provider exemplifies culturally competent care?

1. Delivering care that demonstrates understanding and application to the patient's situation
2. Speaking the patient's language.
3. Understanding some health traditions of the patient.
4. Knowledgeable of the patient's cultural background.

Correct Answer: 1

Rationale 1: When delivering culturally competent care, the provider demonstrates understanding and attends to the total context of the patient's situation.

Rationale 2: Speaking the patient's language is being language-proficient; however, this does not ensure culturally competent care. Interpreters can be used to ensure linguistic competence.

Rationale 3: Understanding some traditions of the patient is being culturally sensitive.

Rationale 4: Being knowledgeable of the patient's cultural background is one aspect of being culturally appropriate.

Global Rationale:

Cognitive Level: Applying

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO04 - Articulate the attributes of Cultural Competency and Cultural Care.

Question 6

Type: MCSA

When a health care provider takes the time to learn the underlying background of a patient to provide the best possible health care, which type of cultural care is being provided?

1. Appropriate
2. Sensitive
3. Designated
4. Competent

Correct Answer: 1

Rationale 1: Culturally appropriate care implies that the provider applies the underlying background knowledge that he or she must possess in order to give a patient the best possible care.

Rationale 2: Culturally sensitive care implies that the provider possesses some basic knowledge of and constructive attitudes toward health traditions observed among the different cultural groups in the practice setting.

Rationale 3: Culturally designated care is not a correct cultural term.

Rationale 4: Culturally competent care implies that within the delivered care, the provider understands and attends to the total context of the patient's situation.

Global Rationale:

Cognitive Level: Analyzing

Client Need: Health Promotion and Maintenance

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO04 - Articulate the attributes of Cultural Competency and Cultural Care.

Question 7

Type: MCSA

The health care organization has made a conscious effort to provide linguistically appropriate services to its predominantly Hispanic population, incorporating within its staff members from different Spanish-speaking countries of Latin America. Which cultural care concept is this organization implementing?

1. Language proficiency
2. Cultural competence
3. Cultural sensitivity
4. Cultural appropriateness

Correct Answer: 1

Rationale 1: Language proficiency is the provision of linguistically appropriate services and implementation of competent interpreter services when the patient or family does not understand, speak, or read English.

Rationale 2: Cultural competence means that the provider understands and attends to the total context of the patient's situation when delivering care.

Rationale 3: Cultural sensitivity implies that the provider possesses some basic knowledge of and constructive attitudes toward the health traditions observed among diverse cultural groups.

Rationale 4: Cultural appropriateness implies that the provider applies the underlying background knowledge of the patient to provide the best possible care.

Global Rationale:

Cognitive Level: Applying

Client Need: Safe Effective Care Environment

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO04 - Articulate the attributes of Cultural Competency and Cultural Care.

Question 8

Type: MCMA

The staff development instructor is planning a seminar that focuses on the variables leading to generational conflict. What will the instructor include in this content?

Standard Text: Select all that apply.

1. Decade of birth

2. Generation in the United States

3. Class

4. Language

5. Socialization

Correct Answer: 1,2,3,4

Rationale 1: People's life experiences vary and depend upon the events of the decades in which they were born and the cultural values and norms of those times.

Rationale 2: Worldviews differ between the immigrant generation and subsequent generations who have resided in the United States for many years.

Rationale 3: Social class includes education, economics, and background. There are differences among people predicated on class.

Rationale 4: There are conflicts between those with limited English-speaking skills and those who do not understand English with those who provide care from English speakers.

Rationale 5: Socialization is not a variable that contributes to generational conflict.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: LO05 - Determine and discuss sociocultural events that may influence the life trajectory of a given person.

Question 9

Type: MCMA

The nurse practitioner is ensuring that an adequate amount of educational materials are printed in languages that reflect the patient population. What are the reasons for this health care provider treating a more diverse patient population?

Standard Text: Select all that apply.

1. Demographic changes

2. Participation in insurance programs

3. Reflects the nurse practitioner's cultural background

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4. The nurse practitioner is from a minority group.
5. The educational materials will teach the patient how to be healthy or ill.

Correct Answer: 1,2

Rationale 1: The mainstream health care provider is treating a more diverse patient population as a result of demographic changes.

Rationale 2: The mainstream health care provider is treating a more diverse patient population as a result of participation in insurance programs.

Rationale 3: One's personal cultural background impacts how patients access and respond to care services.

Rationale 4: One's personal cultural background impacts how patients access and respond to care services.

Rationale 5: Health and illness can be interpreted in terms of personal experience and expectations. We learn from our own culture how to be healthy or ill.

Global Rationale:

Cognitive Level: Analyzing

Client Need: Health Promotion and Maintenance

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: LO01 - Discuss the underpinnings of the need for cultural and linguistic competence.

Question 10

Type: MCMA

The nurse is planning care for a group of patients from different cultural backgrounds. What aspects of the nurse will impact how the patients access and respond to health care services?

Standard Text: Select all that apply.

1. Cultural background
2. Heritage
3. Language
4. Role
5. Age

Correct Answer: 1,2,3

Rationale 1: One's personal cultural background has a considerable impact on how he or she will access and respond to health care services.

Rationale 2: One's heritage has a considerable impact on how he or she will access and respond to health care services.

Rationale 3: One's language has a considerable impact on how he or she will access and respond to health care services.

Rationale 4: One's role does not impact how he or she will access and respond to health care services.

Rationale 5: One's age does not impact how he or she will access and respond to health care services.

Global Rationale:

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: LO01 - Discuss the underpinnings of the need for cultural and linguistic competence.

Question 11

Type: SEQ

The nurse is reviewing the steps needed to develop cultural competency. In which order will the nurse complete the steps of this process?

Standard Text: Click and drag the options below to move them up or down.

Choice 1. Personal heritage

Choice 2. Heritage of others

Choice 3. Health and health beliefs and practices

Choice 4. Health care culture and system

Choice 5. Traditional health care systems

Correct Answer: 1,2,3,4,5

Rationale 1: The first step to cultural competency is personal heritage. The nurse will analyze answers to the following questions: "Who are you," "What is your heritage," and "What are your health beliefs?"

Rationale 2: The second step to cultural competency is the heritage of others. Here, the nurse will determine who the family and community is to the nurse.

Rationale 3: The third step to cultural competency is health and health beliefs and practices. The nurse will analyze competing philosophies in this step.

Rationale 4: The fourth step to cultural competency is health care culture and system. In this step, the nurse analyzes all of the issues and problems within the health care culture and system.

Rationale 5: The fifth step to cultural competency is traditional health care systems. At this step, the nurse analyzes the way that health was for most and the way health still is for many.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: LO01 - Discuss the underpinnings of the need for cultural and linguistic competence.

Question 12

Type: MCMA

The nurse is planning the care for a patient from a non-English-speaking culture. Which terms would the nurse use that reflect cultural care?

Standard Text: Select all that apply.

1. Literacy
2. Refugee
3. Silence
4. Sacred times
5. Surgery

Correct Answer: 1,2,3,4

Rationale 1: Literacy is a term that would reflect cultural care.

Rationale 2: Refugee is a term that would reflect cultural care.

Rationale 3: Silence is a term that would reflect cultural care.

Rationale 4: Sacred times is a phrase that would reflect cultural care.

Rationale 5: Surgery is not a phrase that would reflect cultural care.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: LO01 - Discuss the underpinnings of the need for cultural and linguistic competence.

Question 13

Type: MCMA

A health care organization provides care to patients that are of Hispanic, Asian, and Eastern European heritage. What will the organization do to ensure that the staff represents the demographics of the service area?

Standard Text: Select all that apply.

1. Hire nurses that speak Spanish.
2. Promote a staff member from the Asian culture.
3. Provide language assistance services.
4. Post signage in the languages of the different groups
5. Incorporate internal audits for culturally appropriate services

Correct Answer: 1,2

Rationale 1: Health care organizations should implement strategies to recruit a diverse staff that are representatives of the demographic characteristic of the service area.

Rationale 2: Health care organizations should implement strategies to promote a diverse staff that are representatives of the demographic characteristic of the service area.

Rationale 3: Providing language assistance services does not ensure that staff represents the demographic characteristics of the service area. This action ensures that communication can be done with the patients from the different cultural groups.

Rationale 4: Posting signage in the languages of the different groups does not ensure that staff represents demographic characteristics of the service area. This action ensures communication can be done with the patients from the different cultural groups.

Rationale 5: Incorporating internal audits for culturally appropriate services does not ensure that staff represents demographic characteristics of the service area. This action is a step when structuring culturally competent care.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO02 - Describe the National Standards for Culturally and Linguistically Appropriate Services in Health Care.

Question 14

Type: MCMA

The staff nurse is identifying ways to communicate care needs for a patient from a non-English-speaking culture. How will the nurse use the tool within the Joint Commission monograph roadmap for hospitals to help with this need?

Standard Text: Select all that apply.

1. Access a checklist to use during the admission process.
2. Follow the steps in the assessment checklist.
3. Review the points during the phases of treatment.
4. Identify all of the steps needed for discharge.
5. Recognize ways to adapt to the patient's culture.

Correct Answer: 1,2,3,4

Rationale 1: The Joint Commission monograph is a roadmap for hospitals that provides checklists to improve effective communication during the admission process.

Rationale 2: The Joint Commission monograph is a roadmap for hospitals that provides checklists to improve effective communication during the assessment process.

Rationale 3: The Joint Commission monograph is a roadmap for hospitals that provides checklists to improve effective communication during the treatment process.

Rationale 4: The Joint Commission monograph is a roadmap for hospitals that provides checklists to improve effective communication during the discharge process.

Rationale 5: The Joint Commission identifies adapting to diversity as a way to demonstrate cultural competency, but not as a specific checklist to improve communication with individuals from different cultures.

Global Rationale:

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: LO03 - Describe institutional mandates regarding cultural and linguistic competence.

Question 15

Type: MCMA

The Department of Nursing with a health care organization is planning steps that reflect the Joint Commission's recommendations for cultural competence. What will the nursing department include in these steps?

Standard Text: Select all that apply.

1. Value diversity
2. Assess themselves
3. Manage difference
4. Acquire cultural knowledge
5. Hire staff from different cultures

Correct Answer: 1,2,3,4

Rationale 1: Valuing diversity is a recommendation from the Joint Commission to gain cultural competence.

Rationale 2: Assessing themselves is a recommendation from the Joint Commission to gain cultural competence.

Rationale 3: Managing difference is a recommendation from the Joint Commission to gain cultural competence.

Rationale 4: Acquiring cultural knowledge is a recommendation from the Joint Commission to gain cultural competence.

Rationale 5: Hiring staff from different cultures is not a recommendation from the Joint Commission to gain cultural competence. This is a recommendation to achieve culturally and linguistically appropriate services in health care.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: LO03 - Describe institutional mandates regarding cultural and linguistic competence.

Question 16

Type: MCMA

The Shared Governance committee is planning strategies for cultural competency when providing patient care. Which facets will the committee include when planning these strategies?

Standard Text: Select all that apply.

1. Health disparities
2. Spatial factors
3. Manners
4. Dietary practices
5. Insurance

Correct Answer: 1,2,3,4

Rationale 1: Health disparities is a facet of the philosophy of cultural competency.

Rationale 2: Spatial factors is a facet of the philosophy of cultural competency.

Rationale 3: Manners is a facet of the philosophy of cultural competency.

Rationale 4: Dietary practices is a facet of the philosophy of cultural competency.

Rationale 5: Insurance is not a facet of the philosophy of cultural competency.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: LO04 - Articulate the attributes of Cultural Competency and Cultural Care.

Question 17

Type: MCMA

A health care organization provides care to individuals of whom 75% are from non-English-speaking cultures. When determining the languages to represent within the organization, on which will the organization focus?

Standard Text: Select all that apply.

1. Spanish
2. Chinese
3. French
4. German
5. Arabic

Correct Answer: 1,2,3,4

Rationale 1: The most common non-English languages spoken by people over age 5 at home include Spanish.

Rationale 2: The most common non-English languages spoken by people over age 5 at home include Chinese.

Rationale 3: The most common non-English languages spoken by people over age 5 at home include French.

Rationale 4: The most common non-English languages spoken by people over age 5 at home include German.

Rationale 5: Arabic is not one of the most common non-English languages spoken by people over age at 5 at home.

Global Rationale:

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: LO04 - Articulate the attributes of Cultural Competency and Cultural Care.

Question 18

Type: MCSA

During an assessment, the nurse asks the patient to describe her current health status. In what context will the patient most likely explain her health?

1. Personal experience
2. Impact on family
3. Cost
4. Diagnosis

Correct Answer: 1

Rationale 1: Health and illness can be interpreted and explained in terms of personal experience and expectations.

Rationale 2: Health and illness can be interpreted and explained in terms of personal experience and expectations. A patient's current health status is not likely to be explained according to the impact on the family.

Rationale 3: Health and illness can be interpreted and explained in terms of personal experience and expectations. A patient's current health status is not likely to be explained according to cost.

Rationale 4: Health and illness can be interpreted and explained in terms of personal experience and expectations. A patient's current health status is not likely to be explained according to diagnosis.

Global Rationale:

Cognitive Level: Analyzing

Client Need: Health Promotion and Maintenance

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Assessment

Learning Outcome: LO01 - Discuss the underpinnings of the need for cultural and linguistic competence.

Question 19

Type: MCSA

The nurse desires to become more culturally competent when providing care to patients from non-English-speaking cultures. Which action would the nurse take to achieve this self-expectation?

1. Commit to a time-consuming journey.
2. Find a seminar on cultural competence.
3. Talk to people from different cultures.
4. Attend a festival from a different culture.

Correct Answer: 1

Rationale 1: The reality of becoming culturally competent is a time-consuming process.

Rationale 2: The development of cultural competency does not occur within a short encounter with a program on cultural diversity.

Rationale 3: Developing cultural competency involves more than talking to people from different cultures.

Rationale 4: Developing cultural competency involves more than attending a festival from a different culture.

Global Rationale:

Cognitive Level: Applying

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Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO01 - Discuss the underpinnings of the need for cultural and linguistic competence.

Question 20

Type: MCSA

The staff development educator is analyzing ways to incorporate cultural competency concepts in continuing education programs. How will the educator explain the concept of cultural competency to staff?

1. Philosophy
2. Condition
3. Theory
4. Fad

Correct Answer: 1

Rationale 1: Cultural competency is a philosophy whereby one develops the skills to understand where a person from a different cultural background than his or her own is coming from.

Rationale 2: Cultural competency is not a condition. It is a philosophy whereby one develops the skills to understand where a person from a different cultural background than his or her own is coming from.

Rationale 3: Cultural competency is not a theory. It is a philosophy whereby one develops the skills to understand where a person from a different cultural background than his or her own is coming from.

Rationale 4: Cultural competency is not a fad. It is a philosophy whereby one develops the skills to understand where a person from a different cultural background than his or her own is coming from.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO01 - Discuss the underpinnings of the need for cultural and linguistic competence.

Question 21

Type: MCSA

A health care organization is planning continuing education for all staff on culturally and linguistically appropriate service delivery. Which category of culturally and linguistically appropriate services in health care will this action support?

1. Fundamentals of culturally competent care
2. Speaking of culturally competent care
3. Structuring culturally competent care
4. Manage the dynamics of difference

Correct Answer: 1

Rationale 1: Ensuring that staff receives ongoing education and training in culturally and linguistically appropriate service delivery is a part of the fundamentals of culturally competent care.

Rationale 2: Ensuring that staff receives ongoing education and training in culturally and linguistically appropriate service delivery is a part of the fundamentals of culturally competent care. Speaking of culturally competent care focuses on language services and printed materials.

Rationale 3: Ensuring that staff receives ongoing education and training in culturally and linguistically appropriate service delivery is a part of the fundamentals of culturally competent care. Structuring culturally competent care focuses on organizational assessments, community profiles, and conflict and grievance resolution processes.

Rationale 4: Managing the dynamics of difference is a recommendation by the Joint Commission for cultural competency.

Global Rationale:

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Evaluation

Learning Outcome: LO02 - Describe the National Standards for Culturally and Linguistically Appropriate Services in Health Care.

Question 22

Type: MCSA

Why would a health care organization maintain a current demographic, cultural, and epidemiological profile of the community?

1. Plan for services.

2. Correlate with health records.
3. Facilitate community involvement.
4. Advertise services.

Correct Answer:

Rationale 1: Health care organizations would maintain a current demographic, cultural, and epidemiological profile of the community to accurately plan for services that respond to the cultural and linguistic characteristics of the service area.

Rationale 2: Health care organizations would maintain a current demographic, cultural, and epidemiological profile of the community to accurately plan for services that respond to the cultural and linguistic characteristics of the service area. Health records should include patients' race, ethnicity, and language for integration into the organization's management information system.

Rationale 3: Health care organizations would maintain a current demographic, cultural, and epidemiological profile of the community to accurately plan for services that respond to the cultural and linguistic characteristics of the service area. Partnerships facilitate community involvement.

Rationale 4: Health care organizations would maintain a current demographic, cultural, and epidemiological profile of the community to accurately plan for services that respond to the cultural and linguistic characteristics of the service area. Public notices would be used to share information about progress and innovations when implementing culturally and linguistically appropriate services in health care.

Global Rationale:

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning

Learning Outcome: LO02 - Describe the National Standards for Culturally and Linguistically Appropriate Services in Health Care.

Question 23

Type: MCSA

The nurse is unable to locate an interpreter to support a patient from a non-English-speaking culture. The patient asks a family member to interpret for the staff. What would the nurse do to ensure culturally and linguistically appropriate services for this patient?

1. Use the family member as an interpreter until a non-family member can be located.
2. Write the questions down for the patient to answer.
3. Do nothing until an interpreter can be located.

4. Use sign language.

Correct Answer: 1

Rationale 1: Family and friends should not be used to provide interpretation services except on request by the patient or consumer.

Rationale 2: The patient is from a non-English-speaking culture and most likely would not understand the written questions.

Rationale 3: The patient's health status could be in jeopardy if nothing is done until an interpreter is located.

Rationale 4: Using sign language is not an appropriate method to communicate with the patient. Hand gestures mean different things to different people.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO02 - Describe the National Standards for Culturally and Linguistically Appropriate Services in Health Care.

Question 24

Type: MCSA

A patient from a non-English-speaking culture comes into the health clinic seeking care. The nurse is unable to determine the patient's primary language. What should the nurse do?

1. Ask for help to determine the patient's primary language.
2. Encourage the patient to seek care elsewhere.
3. Notify Security.
4. Contact a homeless shelter.

Correct Answer: 1

Rationale 1: To avoid discrimination based on national origin, Title VI of the Civil Rights Act of 1964 requires that reasonable steps be taken to provide meaningful access to people with limited English proficiency.

Rationale 2: To avoid discrimination based on national origin, Title VI of the Civil Rights Act of 1964 requires that reasonable steps be taken to provide meaningful access to people with limited English proficiency. Therefore, services cannot be denied.

Rationale 3: To avoid discrimination based on national origin, Title VI of the Civil Rights Act of 1964 requires that reasonable steps be taken to provide meaningful access to people with limited English proficiency. Therefore, services cannot be denied. There is no reason to notify Security.

Rationale 4: To avoid discrimination based on national origin, Title VI of the Civil Rights Act of 1964 requires that reasonable steps be taken to provide meaningful access to people with limited English proficiency. Therefore, services cannot be denied. There is no reason to contact a homeless shelter.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO03 - Describe institutional mandates regarding cultural and linguistic competence.

Question 25

Type: MCSA

In a non-English-speaking patient's medical records, it is indicated that he has no family. However, a large group of people stating that they are the patient's family have just arrived to the critical care unit. What impact does this miscommunication have on the patient's care?

1. Poor decision making
2. Increase the cost
3. Improve the outcomes
4. Enhance therapeutic communication

Correct Answer: 1

Rationale 1: Language barriers can cause poor, abbreviated, or erroneous communication and poor decision making on the part of both the provider and patient.

Rationale 2: Language barriers can cause poor, abbreviated, or erroneous communication and poor decision making on the part of the provider and patient. It has not been documented that language barriers increase the cost for health care.

Rationale 3: Language barriers can cause poor, abbreviated, or erroneous communication and poor decision making on the part of the provider and patient. Language barriers do not improve the patient's outcomes.

Rationale 4: Language barriers can cause poor, abbreviated, or erroneous communication and poor decision making on the part of the provider and patient. Language barriers do not enhance therapeutic communication.

Global Rationale:

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Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Evaluation

Learning Outcome: LO03 - Describe institutional mandates regarding cultural and linguistic competence.

Question 26

Type: MCSA

The nurse working in a Joint Commission–accredited organization is admitting a patient from a non-English-speaking culture. Which action supports the Joint Commission principle of effective communication?

1. Assess communication needs
2. Value diversity
3. Manage the dynamics of difference
4. Adapt to diversity

Correct Answer: 1

Rationale 1: Assessing communication needs is a Joint Commission principle to support cultural competency in health care.

Rationale 2: Valuing diversity is an organizational action to ensure cultural competence.

Rationale 3: Managing the dynamics of difference is an organizational action to ensure cultural competence.

Rationale 4: Adapting to diversity is an organizational action to ensure cultural competence.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO03 - Describe institutional mandates regarding cultural and linguistic competence.

Question 27

Type: MCSA

The nurse is completing a survey that includes questions about different aspects of cultural competence. What is the purpose of this survey?

1. Assessment of cultural competence
2. Manage the dynamics of difference
3. Value diversity
4. Institutionalize cultural knowledge

Correct Answer: 1

Rationale 1: The Joint Commission recognizes that cultural competence requires organizations and personnel to assess themselves with regards to cultural competence.

Rationale 2: The Joint Commission recognizes that cultural competence requires organizations and personnel to assess themselves with regards to cultural competence. Managing the dynamics of difference would be achieved through a different strategy.

Rationale 3: The Joint Commission recognizes that cultural competence requires organizations and personnel to assess themselves with regards to cultural competence. Valuing diversity would be achieved through a different strategy.

Rationale 4: The Joint Commission recognizes that cultural competence requires organizations and personnel to assess themselves with regards to cultural competence. Institutionalizing cultural knowledge would be achieved through a different strategy.

Global Rationale:

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Evaluation

Learning Outcome: LO03 - Describe institutional mandates regarding cultural and linguistic competence.

Question 28

Type: MCSA

The nurse is planning care to address health care needs for a non-English-speaking patient and family. What would the nurse use as a guide for this care?

1. Checklist
2. Standardized care plan
3. Nursing textbook
4. Care map

Correct Answer: 1

Rationale 1: The Joint Commission has created checklists for activities to address patient- and family-centered care.

Rationale 2: A standardized care plan may or may not address the cultural needs of the patient and family.

Rationale 3: A nursing textbook may or may not address the cultural needs of the patient and family.

Rationale 4: A care map may or may not address the cultural needs of the patient and family.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO03 - Describe institutional mandates regarding cultural and linguistic competence.

Question 29

Type: MCSA

Unlicensed assistive personnel (UAP) ask the nurse to explain the difference between cultural care and other types of care. What would the nurse say in response to the UAP?

1. It is holistic.
2. It is a fad.
3. It focuses on scientific theory.
4. It is a belief system.

Correct Answer: 1

Rationale 1: Cultural care is holistic care.

Rationale 2: Cultural care is not a fad.

Rationale 3: Cultural care does not focus on scientific theory.

Rationale 4: Cultural care is not a belief system.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO04 - Articulate the attributes of Cultural Competency and Cultural Care.

Question 30

Type: MCSA

The nurse is struggling with providing culturally competent care to non-English-speaking patients because the organization does not have any resources to support the patients' care needs. What is this nurse experiencing?

1. Dissonance
2. Compromise
3. Confusion
4. Distress

Correct Answer: 1

Rationale 1: Dissonance is when a practitioner provides culturally and linguistically competent care which is not in harmony with the organization's beliefs and practices.

Rationale 2: Dissonance is when a practitioner provides culturally and linguistically competent care which is not in harmony with the organization's beliefs and practices. Compromise is not a term used to describe culturally competent care.

Rationale 3: Dissonance is when a practitioner provides culturally and linguistically competent care which is not in harmony with the organization's beliefs and practices. Confusion is not a term used to describe culturally competent care.

Rationale 4: Dissonance is when a practitioner provides culturally and linguistically competent care which is not in harmony with the organization's beliefs and practices. Distress is not a term used to describe culturally competent care.

Global Rationale:

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Evaluation

Learning Outcome: LO04 - Articulate the attributes of Cultural Competency and Cultural Care.

Question 31

Type: MCSA

Spector, *Cultural Diversity in Health and Illness*, 8/E Test Bank

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The nurse is disappointed with not being able to provide educational materials in a non-English-speaking patient's primary language. What can the nurse do to serve as an advocate when providing culturally competent care?

1. Find or create materials to meet the patients' needs.
2. Teach the patient in English.
3. Provide educational materials written in English.
4. Ask the physician to talk with the patient.

Correct Answer: 1

Rationale 1: Cultural competence is a learning process. Health care providers need to serve as patient advocates and not advocates of the organization or modern health care.

Rationale 2: Cultural competence is a learning process. Health care providers need to serve as patient advocates and not advocates of the organization or modern health care. Teaching the patient in English is not providing culturally competent care.

Rationale 3: Cultural competence is a learning process. Health care providers need to serve as patient advocates and not advocates of the organization or modern health care. Providing educational materials written in English is not providing culturally competent care.

Rationale 4: Cultural competence is a learning process. Health care providers need to serve as patient advocates and not advocates of the organization or modern health care. Asking the physician to talk with the patient is not providing culturally competent care.

Global Rationale:

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Implementation

Learning Outcome: LO04 - Articulate the attributes of Cultural Competency and Cultural Care.