

1. A community health nurse has scheduled a hypertension clinic in a local shopping mall in which shoppers have the opportunity to have their blood pressure measured and learn about hypertension. This nursing activity would be an example of which type of prevention activity?
- A) Tertiary prevention
 - B) Secondary prevention
 - C) Primary prevention
 - D) Disease prevention

Ans: B

Feedback:

Secondary prevention centers on health maintenance aim at early detection and prevention. Disease prevention is not a form of health care but is a focus on primary prevention.

2. The nursing instructor is preparing a group of students for their home care rotation. In preparation, the group discusses the patients that they are most likely to care for in the home. Which of the following groups are the most common recipients of home care services?
- A) Mentally ill patients
 - B) Patients receiving rehabilitation after surgery
 - C) Terminally ill and palliative patients
 - D) Elderly patients

Ans: D

Feedback:

The elderly are the most frequent users of home care services. The patient must be acutely ill, home bound, and in need of skilled nursing services to be eligible for this service. The other answers are incorrect because it is the elderly who are seen most frequently in the home health setting, though each of the other listed groups may sometimes receive home care.

3. A recent nursing graduate has been surprised at the sharp contrast between some patients' lifestyles in their homes and the nurse's own practices and beliefs. To work therapeutically with the patient, what must the nurse do?
- A) Request another assignment if there is dissonance with the patient's lifestyle.
 - B) Ask the patient to come to the agency to receive treatment, if possible.
 - C) Resolve to convey respect for the patient's beliefs and choices.
 - D) Try to adapt the patient's home to the norms of a hospital environment.

Ans: C

Feedback:

To work successfully with patients in any setting, the nurse must be nonjudgmental and convey respect for patients' beliefs, even if they differ sharply from the nurse's. This can be difficult when a patient's lifestyle involves activities that a nurse considers harmful or unacceptable, such as smoking, use of alcohol, drug abuse, or overeating. The nurse should not request another assignment because of a difference in beliefs, nor do nurses ask for the patient to come to you at the agency to receive treatment. It is also inappropriate to convert the patient's home to a hospital-like environment.

4. Infection control is a high priority in every setting where nursing care is provided. When performing a home visit, how should the nurse best implement the principles of infection control?
- A) Perform hand hygiene before and after giving direct patient care.
 - B) Remove the patient's wound dressings from the home promptly.
 - C) Disinfect the patient's syringes prior to disposal.
 - D) Establish a sterile field in the patient's home before providing care.

Ans: A

Feedback:

Infection control is as important in the home as it is in the hospital, but it can be more challenging in the home and requires creative approaches. As in any situation, it is important to clean one's hands before and after giving direct patient care, even in a home that does not have running water. Removing the wound dressings from the home and disinfecting all work areas in the home are not the best implementations of infection control in the home. Used syringes are never disinfected and a sterile field is not always necessary.

5. An adult patient is ready to be discharged from the hospital after undergoing a transmetatarsal amputation. When should your patient's discharge planning begin?
- A) The day prior to discharge
 - B) The day of estimated discharge
 - C) The day that the patient is admitted
 - D) Once the nursing care plan has been finalized

Ans: C

Feedback:

Discharge planning begins with the patient's admission to the hospital and must consider the possible need for follow-up home care. Discharge planning should begin prior to the other listed times.

6. A home health nurse is preparing to make the initial visit to a new patient's home. When planning educational interventions, what information should the nurse provide to the patient and his or her family?
- A) Available community resources to meet their needs
 - B) Information on other patients in the area with similar health care needs
 - C) The nurse's contact information and credentials
 - D) Dates and times of all scheduled home care visits

Ans: A

Feedback:

The community-based nurse is responsible for informing the patient and family about the community resources available to meet their needs. During initial and subsequent home visits, the nurse helps the patient and family identify these community services and encourages them to contact the appropriate agencies. When appropriate, nurses may make the initial contact. The other answers are incorrect because it is inappropriate to ever provide information on other patients to a patient. The nurse's credentials are not normally discussed. Giving the patient the dates and times of their scheduled home visits is appropriate, but may not always be possible. It is more important to provide them with resources available within the community to meet their needs.

7. The home health nurse receives a referral from the hospital for a patient who needs a home visit for wound care. After obtaining the referral, what would be the first action the nurse should take?
- A) Have community services make contact with the patient.
 - B) Obtain a physician's order for the visit.
 - C) Call the patient to obtain permission to visit.
 - D) Arrange for a home health aide to initially visit the patient.

Ans: C

Feedback:

After receiving a referral, the first step is to call the patient and obtain permission to make the visit. Then the nurse should schedule the visit and verify the address. A physician's order is not necessary to schedule a visit with the patient. The nurse may identify community services or the need for a home health aide after assessing the patient and the home environment during the first visit with the patient. This would not be delegated to a home health aide.

8. At the beginning of a day that will involve several home visits, the nurse has ensured that the health care agency has a copy of her daily schedule. What is the rationale for the nurse's action?
- A) It allows the agency to keep track for payment to the nurse.
 - B) It supports safety precautions for the nurse when making a home care visit.
 - C) It allows for greater flexibility for the nurse and his or her colleagues for changes in assignments.
 - D) It allows the patient to cancel appointments with minimal inconvenience.

Ans: B

Feedback:

Whenever a nurse makes a home visit, the agency should know the nurse's schedule and the locations of the visits. The other answers are incorrect because providing the agency with a copy of the daily schedule is not for the purpose of correctly paying the nurse or for the ease of the nurse in changing assignments. It is also not intended for the patient's ease in canceling appointments.

9. There are specific legal guidelines and regulations for the documentation related to home care. When providing care for a patient who is a Medicaid recipient, what is most important for the nurse to document?
- A) The medical diagnosis and the supplies needed to care for the patient
 - B) A summary of the patient's income tax paid during the previous year
 - C) The specific quality of nursing care that is needed
 - D) The patient's homebound status and the specific need for skilled nursing care

Ans: D

Feedback:

Medicare, Medicaid, and third-party payers require documentation of the patient's homebound status and the need for skilled professional nursing care. The medical diagnosis and specific detailed information on the functional limitations of the patient are usually part of the documentation. The other answers are incorrect because nursing documentation does not include needed supplies, tax information, or the quality of care needed.

10. Your patient has had a total knee replacement and will need to walk with a two-wheeled walker for 6 weeks. He is being discharged home with a referral for home health care. What will the home care nurse need to assess during the initial nursing assessment in the home?
- A) Assistance of neighbors
 - B) Qualification for Medicare and Medicaid
 - C) Costs related to the visits
 - D) Characteristics of the home environment

Ans: D

Feedback:

The initial assessment includes evaluating the patient, the home environment, the patient's self-care abilities or the family's ability to provide care, and the patient's need for additional resources. Normally an assessment is not made of assistance on the part of neighbors or the costs of the visit. Medicare and Medicaid qualifications would normally be determined beforehand.

11. A nurse who has an advanced degree in primary care for a pediatric population is employed in a health clinic. In what role is this nurse functioning?

- A) Nurse practitioner
- B) Case coordinator
- C) Clinical nurse specialist
- D) Clinic supervisor

Ans: A

Feedback:

Nurse practitioners, educated in primary care, often practice in ambulatory care settings that focus on gerontology, pediatrics, family or adult health, or women's health. Case coordinators and clinical supervisors do not necessarily require an advanced degree, and a clinical nurse specialist is not educated in primary care. Primary care is the specific focus of CNPs.

12. A nurse is based in an automotive assembly plant and works with the plant's employees in the areas of health promotion and basic primary care. What nursing role is this nurse performing?

- A) Occupational health nurse
- B) Community nurse specialist
- C) Nurse clinician
- D) Public health nurse

Ans: A

Feedback:

Occupational health nurses may provide direct care to patients who are ill, conduct health education programs for the industry staff, or set up health programs. The other answers are incorrect because they are not consistent with a nurse's placement in a manufacturing setting.

13. A school nurse has been working closely with a student who has cystic fibrosis. The nurse is aware that children with health problems are at major risk for what problem?

- A) Mental health disorders
- B) Gradual reduction in intelligence
- C) Psychological stress due to a desire to overachieve
- D) Underachievement in school

Ans: D

Feedback:

School-aged children and adolescents with health problems are at major risk for underachieving or failing in school. These students do not necessarily have a high risk of mental health disorders or a desire to overachieve. Health problems do not normally cause a progressive decline in intelligence.

14. A community health nurse is aware that restoration of health often depends on appropriate interventions performed early in the course of a disease. Which patient is most likely to seek health care late in the course of his or her disease process and deteriorate more quickly than other patients?
- A) A patient who has been homeless for an extended period of time
 - B) A patient who recently immigrated to the United States
 - C) A patient who is 88 years old and who has enjoyed relatively good health
 - D) A teenage boy

Ans: A

Feedback:

Because of numerous barriers, the homeless seek health care late in the course of a disease and deteriorate more quickly than patients who are not homeless. Many of their health problems are related in large part to their living situation. The other answers are incorrect because these populations do not as often seek care late in the course of their disease process and deteriorate quicker than other populations.

15. A recent nursing school graduate has chosen to pursue a community nursing position because of increasing opportunities for nurses in community settings. What changes in the health care system have created an increased need for nurses to practice in community-based settings? Select all that apply.
- A) Tighter insurance regulations
 - B) Younger population
 - C) Increased rural population
 - D) Changes in federal legislation
 - E) Decreasing hospital revenues

Ans: A, D, E

Feedback:

Changes in federal legislation, tighter insurance regulations, decreasing hospital revenues, and alternative health care delivery systems have also affected the ways in which health care is delivered. Our country does not have an increased rural population nor is our population younger.

16. A nursing student has taught a colleague that nursing practice is not limited to hospital settings, explaining that nurses are now working in ambulatory health clinics, hospice settings, and homeless shelters and clinics. What factor has most influenced this increased diversity in practice settings for nurses?
- A) Population shift to more rural areas
 - B) Shift of health care delivery into the community
 - C) Advent of primary care clinics
 - D) Increased use of rehabilitation hospitals

Ans: B

Feedback:

As health care delivery shifts into the community, more nurses are working in a variety of community-based settings. These settings include public health departments, ambulatory health clinics, long-term care facilities, hospice settings, industrial settings (as occupational nurses), homeless shelters and clinics, nursing centers, home health agencies, urgent care centers, same-day surgical centers, short-stay facilities, and patients' homes. The other answers are incorrect because our population has not shifted to a more rural base, and the use of primary care clinics has not influenced an increase in practice settings or the use of rehabilitation hospitals.

17. A nurse is collaborating with a team of community nurses to identify the vision and mission for community care. What is the central focus of community-based nursing?
- A) Increased health literacy in the community
 - B) Distributing ownership for the health of the community
 - C) Promoting and maintaining the health of individuals and families
 - D) Identifying links between lifestyle and health

Ans: C

Feedback:

Community-based nursing practice focuses centrally on promoting and maintaining the health of individuals and families, preventing and minimizing the progression of disease, and improving quality of life. Health literacy is not a goal in itself, but rather a means to promoting health. Distributing ownership and identifying links between lifestyle and health are not the essence of community-based care.

18. You are the community-based nurse who performs the role of case manager for a small town about 60 miles from a major health care center. When planning care in your community, what is the most important variable in community-based nursing that you should integrate into your planning?
- A) Eligibility requirements for services
 - B) Community resources available to patients
 - C) Transportation costs to the medical center
 - D) Possible charges for any services provided

Ans: B

Feedback:

A community-based nurse must be knowledgeable about community resources available to patients as well as services provided by local agencies, eligibility requirements, and any possible charges for the services. The other answers are incorrect because they are not the most important factors about which a community-based nurse must be knowledgeable.

19. An urban, community-based nurse is looking for community resources for a patient who has complex rehabilitation needs coupled with several comorbid, chronic health conditions. Where is the best place for the nurse to search for appropriate resources?
- A) A hospital directory
 - B) The hospital intranet
 - C) A community directory
 - D) The nurse's own personal network

Ans: C

Feedback:

Most communities have directories of health and social service agencies that the nurse can consult. The other answers are incorrect because hospital directories and intranets usually only include people affiliated with the hospital. The nurse's personal network of contacts may or may not be of use.

20. You are a community-based care manager in a medium-sized community that does not have an up-to-date resource directory available. As a result, you have been given the task of beginning to compile such a directory. What would be important to include in this directory? Select all that apply.

- A) Links to online health sciences journals
- B) Lists of social service workers in the community
- C) Eligibility requirements for services
- D) Lists of the most commonly used resources
- E) Costs associated with services

Ans: C, D, E

Feedback:

If a community does not have a resource booklet, an agency may develop one for its staff. It should include the commonly used community resources that patients need, as well as the costs of the services and eligibility requirements. The other answers are incorrect because a community resource booklet usually would not include links to online professional journals and it would not identify specific social service workers, only agencies.

21. You are assessing a new patient and his home environment following the patient's referral for community-based care. Which of the following is the most important responsibility that you, as a community-based nurse, have at this initial visit?

- A) Encourage the patient and his family to become more involved in their community.
- B) Encourage the patient and his family to delegate someone to contact community resources.
- C) Encourage the patient and his family to focus primarily on online supports.
- D) Encourage the patient and his family to connect with appropriate community resources.

Ans: D

Feedback:

During initial and subsequent home visits, the nurse helps the patient and family identify community services and encourages them to contact the appropriate agencies. This is preferable to delegating another person to make contact. When appropriate, nurses may make the initial contact. A home-health nurse would not normally encourage the patient to become more involved in the community as a means of promoting health. Online forms of support can be useful, but they are not the sole form of support that most patients need.

22. A nurse is comparing some of the similarities and differences between the care that is provided in community- and hospital-based settings. What type of care is provided in both of these settings?
- A) Dieticians
 - B) Ambulatory health care
 - C) Occupational health care
 - D) Hospice care

Ans: B

Feedback:

Ambulatory health care is provided for patients in community or hospital-based settings. The types of agencies that provide such care are medical clinics, ambulatory care units, urgent care centers, cardiac rehabilitation programs, mental health centers, student health centers, community outreach programs, and nursing centers. Dieticians are not generally community-based and hospice care is not generally provided in hospital settings. Occupational health care is situated in workplaces.

23. A community-based case manager is sending a community nurse to perform an initial home assessment of a newly referred patient. To ensure safety, the case manager must make the nurse aware of which of the following?
- A) The potential for at-risk working environments
 - B) Self-defense strategies
 - C) Locations of emergency services in the area
 - D) Standard precautions for infection control

Ans: A

Feedback:

Based on the principle of due diligence, agencies must inform employees of at-risk working environments. Agencies have policies and procedures concerning the promotion of safety for clinical staff, and training is provided to facilitate personal safety. The physical location of emergency services is not important, though methods for contacting emergency services are a priority. Infection control is part of the nurse's own professional responsibility. Self-defense strategies are not always addressed and are not legally mandated.

24. A home health nurse is making a visit to a new patient who is receiving home care following a mastectomy. During the visit, the patient's husband arrives home in an intoxicated state and speaks to both you and the patient in an abusive manner. What is your best response?
- A) Ignore the husband and focus on the patient.
 - B) Return to your agency and notify your supervisor.
 - C) Call the police from your cell phone.
 - D) Remove the patient from the home immediately.

Ans: B

Feedback:

If a dangerous situation is encountered during a visit, the nurse should return to the agency and contact his or her supervisor or law enforcement officials, or both. Ignoring the husband or calling the police while in the home or attempting to remove the patient from the home could further endanger you and the patient.

25. The community-health nurse has received a referral for a new patient who resides in a high-crime area. What is the most important request that the nurse should make of the agency to best ensure safety?
- A) An early morning or late afternoon appointment
 - B) An assigned parking space in the neighborhood
 - C) A colleague to accompany the nurse on the visit
 - D) Someone to wait in the car while the nurse makes the visit

Ans: C

Feedback:

When making visits in high-crime areas, visit with another person rather than alone. A person who is waiting in the car is of little benefit. An early morning or late afternoon appointment would not necessarily guarantee safety. Similarly, assigned parking would not guarantee the nurse's safety while performing the visit.

26. A home health nurse has been assigned to the care of an 82 year-old woman who has been discharged home following hip replacement surgery. At what level of care is this nurse most likely practicing?
- A) Preventative care
 - B) Primary prevention
 - C) Secondary prevention
 - D) Tertiary prevention

Ans: D

Feedback:

Nurses in community-based practice provide preventive care at three levels: primary, secondary, and tertiary. Tertiary prevention focuses on minimizing deterioration and improving quality of life, including rehabilitation to assist patients in achieving their maximum potential by working through their physical or psychological challenges. Home care nurses often focus on tertiary preventive nursing care, although primary and secondary prevention are also addressed. Preventive care is an umbrella term for all three levels of care.

27. You are admitting two new patients to your local home health care service. These patients live within two blocks of each other and both homes are in a high-crime area. What action best protects your personal safety?
- A) Drive a car that is hard to break into.
 - B) Keep your satchel close to you at all times.
 - C) Do not leave anything in the car that might be stolen.
 - D) Do not wear expensive jewelry.

Ans: D

Feedback:

Do not drive an expensive car or wear expensive jewelry when making visits. While all of these answers might be wise precautions to take, the other suggestions address property rather than personal safety.

28. In two days you are scheduled to discharge a patient home after left hip replacement. You have initiated a home health referral and you have met with a team of people who have been involved with this patient's discharge planning. Knowing that the patient lives alone, who would be appropriate people to be on the discharge planning team? Select all that apply.

- A) Home health nurse
- B) Physical therapist
- C) Pharmacy technician
- D) Social worker
- E) Meal-on-Wheels provider

Ans: A, B, D

Feedback:

The development of a comprehensive discharge plan requires collaboration with professionals at both the referring agency and the home care agency, as well as other community agencies that provide specific resources upon discharge. The pharmacy technician does not participate in discharge planning and there is no indication that Meals-on-Wheels are necessary.

29. A home health nurse is conducting a home visit to a patient who receives wound care twice weekly for a diabetic foot ulcer. While performing the dressing change, the nurse realizes that she forgot to bring the adhesive gauze specified in the wound care regimen. What is the nurse's best action?

- A) Phone a colleague to bring the required supplies as soon as possible.
- B) Improvise, if possible, using sterile gauze and adhesive tape.
- C) Leave the wound open to air and teach the patient about infection control.
- D) Schedule a return visit for the following day.

Ans: B

Feedback:

Improvisation is a necessity in many home health situations. It would be logistically difficult to have the supplies delivered and leaving the wound open to air may be contraindicated. A return visit the next day does not resolve the immediate problem.

30. Discharge planning is an integral part of community-health nursing and home health. Which of the following is prioritized in the discharge-planning process?

- A) Identifying the patient's specific needs
- B) Making a social services referral
- C) Getting physical therapy involved in care
- D) Notifying the pharmacy of the discharge date

Ans: A

Feedback:

The discharge planning process involves identifying the patient's needs and developing a thorough plan to meet them. The other options might be appropriate for some patients, but they are not all appropriate for every patient.

31. Within the public health system there has been an increased demand for medical, nursing, and social services. The nurse should recognize what phenomenon as the basis for this increased demand?
- A) Increased use of complementary and alternative therapies
 - B) The growing number of older adults in the United States
 - C) The rise in income disparity in the United States
 - D) Increasing profit potential for home health services

Ans: B

Feedback:

The growing number of older adults in the United States increases the demand for medical, nursing, and social services within the public health system. Income disparities, profit potential, and increased use of complementary therapies do not account for this change.

32. Nursing care is provided in an increasingly diverse variety of settings. Despite the variety in settings, some characteristics of professional nursing practice are required in any and every setting. These characteristics include which of the following?
- A) Advanced education
 - B) Certification in a chosen specialty
 - C) Cultural competence
 - D) Independent practice

Ans: C

Feedback:

Cultural competence is necessary in any and every care setting. The other answers are incorrect because an advanced education, specialty certification, and the ability to practice independently are not consistencies between every nursing care delivery setting.

33. Medicare is a federal program that finances many Americans' home health care expenses. The Medicare program facilitates what aspect of home health care?
- A) Providing care without the oversight of a physician
 - B) Writing necessary medication orders for the patient
 - C) Ordering physical, occupational, and speech therapy if needed
 - D) Managing and evaluating patient care for seriously ill patients

Ans: D

Feedback:

Many home health care expenditures are financed by Medicare, which allows nurses to manage and evaluate patient care for seriously ill patients who have complex, labile conditions and are at high risk for rehospitalization. Home health nurses, despite who funds their visits, do not provide care without the oversight of a physician; they do not normally write medication orders; nor do they order the services of ancillary specialists such as physical, occupational, or speech therapists.

34. You are a school nurse who will work with an incoming kindergarten student who has a diagnosis of cerebral palsy. Why would you make a home visit before school starts?
- A) To provide anticipatory guidance to the family
 - B) To assess the safety of the child's assistive devices
 - C) To arrange for a teaching aide to work with the child
 - D) To provide follow-up care after the child's clinic visit

Ans: A

Feedback:

Public health, parish, and school nurses may make visits to provide anticipatory guidance to high-risk families and follow-up care to patients with communicable diseases. The other answers are incorrect because they are not functions of the school nurse.

35. A home health nurse has been working for several months with a male patient who is receiving rehabilitative services. The nurse is aware that maintaining the patient's confidentiality is a priority. How can the nurse best protect the patient's right to confidentiality?
- A) Avoid bringing the patient's medical record to the home.
 - B) Discuss the patient's condition and care only when he is alone in the home.
 - C) Keep the patient's medical record secured at all times.
 - D) Ask the patient to avoid discussing his home care with friends and neighbors.

Ans: C

Feedback:

If the nurse carries a patient's medical record into a house, it must be put in a secure place to prevent it from being picked up by others or from being misplaced. This does not mean, however, that it must never be brought to the home. It is not normally necessary to limit discussions to times when the patient is alone. The patient has the right to decide with whom he will discuss his condition and care.

36. A home health nurse has completed a visit to a patient and has immediately begun to document the visit. Accurate documentation that is correctly formatted is necessary for which of the following reasons?
- A) Accurate documentation guarantees that the nurse will not be legally liable for unexpected outcomes.
 - B) Accurate documentation ensures that the agency is correctly reimbursed for the visit.
 - C) Accurate documentation allows the patient to gauge his or her progress over time.
 - D) Accurate documentation facilitates safe delegation of care to unlicensed caregivers.

Ans: B

Feedback:

The patient's needs and the nursing care provided must be documented to ensure that the agency qualifies for payment for the visit. Medicare, Medicaid, and other third-party payors (i.e., organizations that provide reimbursement for services covered under a health care insurance plan) require documentation of the patient's homebound status and the need for skilled professional nursing care. Documentation does not guarantee an absence of liability. Documentation is not normally provided to the patient to gauge his or her progress. Documentation is not primarily used to facilitate delegation to unlicensed caregivers.

37. A home health nurse is collaborating with a hospice nurse in order to transfer the care of a woman who has a diagnosis of lung cancer. To qualify for hospice care, the patient must meet what criterion?
- A) The patient must be medically inappropriate for hospital care.
 - B) The patient must be in the final six months of his or her life.
 - C) The patient's family must demonstrate that they are unable to provide care.
 - D) The patient must have a diagnosis that is associated with high morbidity and mortality.

Ans: B

Feedback:

Patients are eligible for hospice care services if they are determined to be within the final 6 months of life. Eligibility is not determined on the basis of the family's inability to provide care and it is not determined by whether the patient can or cannot receive care in a hospital setting.

38. A home health nurse has completed a scheduled home visit to a patient with a chronic sacral ulcer. The nurse is now evaluating and documenting the need for future visits and the frequency of those visits. What question can the nurse use when attempting to determine this need?
- A) "How does the patient describe his coping style?"
 - B) "When was the patient first diagnosed with this wound?"
 - C) "Is the patient's family willing to participate in care?"
 - D) "Is the patient willing to create a plan of care?"

Ans: C

Feedback:

Determining the willingness and ability of friends and family to provide care can help determine appropriate levels of professional home care. The time of initial diagnosis and the patient's coping style are secondary. The nurse, not the patient, is responsible for creating the plan of care.

39. A home health nurse is conducting an assessment of a patient who may qualify for Medicare. Consequently, the nurse is utilizing the Outcome and Assessment Instrument Set (OASIS). When performing an assessment using this instrument, the nurse should assess which of the following domains of the patient's current status?
- A) Psychiatric status
 - B) Spiritual state
 - C) Compliance with care
 - D) Functional status

Ans: D

Feedback:

The Omaha System of care documentation has been required for over a decade to assure that outcome-based care is provided for all care reimbursed by Medicare. This system uses six major domains: sociodemographic, environment, support system, health status, functional status, and behavioral status and addresses selected health service utilization. It does not explicitly assess spirituality, psychiatric status, or compliance with care.

40. A community health nurse in a large, urban setting is participating in a pilot project that will involve the establishment of a community hub. On what population should the nurse focus?
- A) Postsurgical patients
 - B) Individuals with vulnerable health
 - C) Community leaders
 - D) Individuals motivated to participate in health education

Ans: B

Feedback:

Community hubs are a recent concept that addresses the varied health needs of vulnerable and marginalized populations. Community hubs do not primarily focus on postsurgical patients, community leaders, or individuals who are proactive with health education.