

**SKILLS REQUIRED BY NURSES  
AT PRIMARY HEALTH CARE LEVEL  
IN A DISTRICT HEALTH SYSTEM**

**A DISSERTATION SUBMITTED TO THE:**

**FACULTY OF COMMUNITY AND DEVELOPMENT  
DISCIPLINES**

**SCHOOL OF NURSING  
UNIVERSITY OF NATAL**

**AS A PARTIAL REQUIREMENT FOR THE  
DEGREE:**

**MASTERS IN NURSING:**

**BY:**

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January 2002

## DECLARATION

I DECLARE THIS IS MY OWN WORK. IT IS BEING SUBMITTED FOR THE DEGREE OF MASTERS, AT THE UNIVERSITY OF NATAL, DURBAN. IT HAS NEVER BEEN SUBMITTED FOR ANY OTHER PURPOSE. ALL REFERENCES USED OR QUOTED HAVE BEEN ACKNOWLEDGED BY MEANS OF REFERENCING.

Date 18/01/2002 Signature ESM



## **DEDICATION**

**This dissertation has been dedicated to my family, my sister Thabile and her family and all those who have been behind me and supported me all the way through.**

## ACKNOWLEDGEMENT

I wish to acknowledge with both gratitude and thanks to the Almighty God for wonderful things He has done in making everything possible for me to conduct this study.

My sincere appreciation goes to my supervisor Professor Leana Uys for her guidance, supervision, patience and support throughout. Professor Uys, you are a wonderful person.

To all Primary Health Care Nurses at Uthukela Health District.

Uthukela District Health Management team for their encouragement and support.

Nosipho Nyoka and Lindiwe Mathe for allowing me to use their office and computer.

Shannie, thanks for your patience and willingness to help.

Sipho for his understanding and support.

Sincere gratitude goes to Shirley Allen for being friendly and making everything possible even if you have to come back from holiday.

My friends Dudu Simelane, Simphiwe Mahlobo, Phumzile Kheswa, Winnie Venter, Pepsi Sokhela, Ntokozo Buthelezi, Happy Mbatha for believing in me.

Nomathemba Xaba, Khumbu, I bothered you a lot. You were always willing to help even if you have to forfeit your lunch.

## **ABSTRACT**

The purpose of the study was to do a task analysis of PHC nurse practice by identifying the skills required by nurses working at the primary health care clinic in order to plan staff development programmes. The objectives were: to compile an extensive list of possible tasks; engage Primary Health Care Nurses in identifying the frequency of tasks executed; and engage Primary Health Care Nurses in determining how important are the tasks in their practice.

This was a descriptive survey. A mail survey was used to collect data. Two stratified random samples of nurses were drawn from the sample frame of Uthukela Health District. The sample consisted of 84 Primary Health Care Nurses; 59 registered nurses, 17 enrolled nurses, and 8 enrolled nursing auxiliaries. The questionnaire was developed based on PHC core package, other literature and services provided at PHC clinics. It had three sections; section one dealt with demographic data, section two consisted of the list of activities that describe the nursing practice and the respondents had to indicate the frequency of performing the activity and importance of the activity and section three dealt with the activities that the respondent perform but were not included in the list provided.

The response from mailed questionnaires was 72%. The results show that eleven items were rated very frequent by 70% of the nurses, forty-four items rated frequent by more than 50% of the nurses. Twenty-seven tasks were rated as important by 50% or more of the nurses. In frequency and importance, nineteen items score above 1 standard deviation on this index. In the clinical tasks, promotive and preventive service predominated. A high percentage of these tasks were done very frequently and were seen as important.

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## **CHAPTER 1**

### **INTRODUCTION**

#### **1.1 PROBLEM STATEMENT**

Traditional general nursing education has been totally hospital based. Over the last decade the focus of nursing education has been moving from hospital to community based. The Alma-Ata Declaration stressed the need for health to be at Primary health care level and to be accessible to all people as it is an integral part of health system (World Health Organization, 1978).

The restructuring of health service and establishment of District Health System has made the staff and services accountable to the local community and serve the needs of that community and provide services of the highest quality (ANC, 1994a). This implies that health care workers have to be prepared to practice at primary care level and they need appropriate skills to function properly. According to Primary Health Care package, clinic render comprehensive integrated primary health care services and must have at least one member of staff who has completed recognized Primary Health Care course (Department of Health, 1999).

## 2.

No studies on the skills of health care provider at primary health level have been done. Therefore no data exist with regard to skills required to function in a Primary Health Care clinic. Establishing skills required by nurses at Primary Health Care clinic would help in planning staff development programme.

### 1.2 BACKGROUND TO THE PROBLEM

The challenge facing South Africa is to be part of a comprehensive programme to redress social and economic injustices and ensure that emphasis is on health and not only on medical care (ANC, 1994b). The Reconstruction and Development Programme (RDP) led to the development of District Health System based on the Primary Health Care approach and health service provider accountable to the local communities they serve. Primary Health Care (PHC) forms an integral part of the country's health system. The Reconstruction and Development Programme put emphasis on the shift of the focus of health care from hospitals where care is curative orientated to the communities with care focusing mainly on preventative, promotive, curative and rehabilitative health care. This attempts to lessen pressure in hospitals and promote community participation. Nurses need to provide services of highest quality taking into account local needs and resources of which traditional nursing education did not prepare them to practice at primary health care level.

### 3.

Based on these changes WHO recommend that the health personal education be community based. This is viewed as a means to ensure the health personnel are responsive to the needs of the people and as a means to achieving educational relevance to the community needs. The South African Nursing Council Regulations stated that the continued development of special knowledge and skills and of clinical specification is essential to promote standards of nursing education and nursing practice. Primary Health Care is inherent in all nursing practice (SANC. 1978). Appropriate multi-disciplinary community programme and outcome-based education programmes should be developed to support and to enhance Primary Health Care approach also encourage the community to take full responsibility for their own health (Department of Health 1997). According to service description for Uthukela Health District, the community expects to be treated and dealt with by competent, caring staff and participate in decision making that affects their health (Uthukela Health District, unknown).

#### 1.3 PURPOSE

The purpose of the study is to do a task analysis of PHC nurse practice by identifying the skills required by nurses working at the primary health care clinic in order to plan staff development programme.

## **1.4 OBJECTIVES**

1. Compile extensive lists of possible tasks
2. Engage Primary Health Care Nurses in identifying the frequency of tasks executed.
3. Engage Primary Health Care Nurses in determining how important are the tasks in their practice.

## **1.5 RESEARCH QUESTIONS**

1. What are the ranges of current tasks?
2. What are the priority tasks in Primary Health Care practice based on frequency and importance?

## **1.6 SIGNIFICANCE OF THE STUDY**

Based on above challenges, restructuring of health system and development of a District Health System with emphasis on Primary Health Care approach, this study is important because primary health care clinics are run by nurses. Establishing skills required by such nurses will help in ensuring the right skills are employed at the right place. Human resource development plans will develop based on practice data to ensure efficiency and cost effective service delivery.

## **1.7 DEFINITION OF TERMS**

### **SKILLS**

Special ability required for a task acquired by practice and training (Marriner 1984:200). In this study it will be explored in terms of tasks.

### **PRIMARY HEALTH CARE**

It is essential health care based on practical sound and socially acceptable methods made accessible to individual families in the community through their full participation and at the cost that community and country can afford. (WHO, 1978)

### **TASKS ANALYSIS**

It is a systematic process of collecting data and making certain judgement about all important information related to nature of specific problem (Booyens 1993:19).

### **NURSE**

Registered or enrolled person in terms of nursing Act 50 of 1978. Person concerned with the promotion and prevention of ill health and care of those suffering ill health (Chapple & Drew, 1981:47).



## **JOB DESCRIPTION**

It is a written statement of what the jobholder does, how he or she does it and under what conditions the job performed (Booyens 1993:19)

## **TASK**

A task is a discrete procedure, which forms part of the comprehensive management of nurse practice at PHC level (Reed & Procter 1993: 174).

## **CHAPTER 2**

### **LITERATURE REVIEW**

#### **2.1. INTRODUCTION**

The purpose of the review chapter was to review literature on Primary Health Care and District Health System, and research studies that have been done on the research question, specifically with regard to the skills required by nurses at Primary Health Care level in a District Health System.

Literature review discussed under the following headings:

Primary Health Care;

Human Resource Planning and Development;

Job Description of Primary Health Care Nurses.



## 2.2 PRIMARY HEALTH CARE

Primary health care is the integral part of the National Health System. The declaration of Alma-Ata defined primary health care as essential health care based on practical scientifically sound and social acceptable methods and technology made universally acceptable to individuals and families in the community through their full participation and at a cost that the community and the country can afford to maintain every stage of their development in the spirit of self-reliance and self-determination. The Alma-Ata Declaration (WHO, 1978) highlighted five principles underlying primary health care as follows:

- **Equitable distribution of resources** – which imply that health care services, must be more equally accessible to all.
- **Community participation in decision-making** – the dimensions of community participation include:
  - \* The organization of services on a community basis;
  - \* The contribution of the community to the operation and maintenance of the services;
  - \* Community participation in the planning and the management of services, community input into the overall strategies, policies and work plan of the programme.

**- Focus on preventative/promotive health service**

The focus is on disease prevention and health promotion rather than curative Services.

**- Appropriate technology**

The material and methods used in health system should be acceptable and relevant, including the human resources with appropriate skills, adapted to local needs.

**- A multi-sectoral approach**

Health care is regarded as one part or element of total care which include education, nutrition, water supply and housing. All of these are essential requirements for a state of well being to prevail.

**2.2.1 Elements of Primary Health Care**

According to Alma Ata Declaration (WHO, 1978) eight essential elements

Of primary health care services are:

- Education concerning prevailing health problems and methods of preventing and controlling them.

- Promotion of food supply and proper nutrition
- An adequate supply of safe water and basic sanitation.
- Maternal child health care including family planning
- Immunization against major infectious diseases.
- Prevention and control of locally endemic diseases
- Appropriate treatment of common diseases and injuries
- Provision of essential drug supply.

The primary health care package of South Africa (Department of Health, 1999) summarized the services to be provided through district health system, in addition to the services based on elements of primary health care are

- Mental Health Service
- School Health Service
- Accidental and emergency services
- Curative services for some chronic diseases

The norms and standards set in the package are comprehensive to be used by the staff to assess their own performances and that of the clinic and the community to assess the quality of service entitled to them. This is in line with the Service Delivery Principles of Batho Pele (People First) N1459 (Department of Public Service and Administration, 1997) which are as follows:

- Consultation – which means that people should be consulted about the level and quality of service they received and wherever possible should be given a choice about services they are offered.

- Service standard – community should be told what level and quality of service they will receive so that they are aware of what to expect.
- Access – all citizens should be treated with courtesy and consideration.
- Information – Community should be given full accurate information about services provided at primary health care clinic.
- Openness and transparency – people should be told how departments are run, how much they cost and who is in charge.
- Redress – if promised standard of service is not delivered, community should be offered an apology, a full explanation and speedy and effective remedy. Positive response for complaints made.
- Value for money – Services should be provided economically and efficiently.

### **2.2.2 Application of Alma Ata Declaration to District Health System**

In May 1986 World Health Assembly called countries to place emphasis on the strengthening of District Health System (DHS) based on Primary Health Care (PHC). The World Health Organization defined District Health System as a local operational framework for the implementation of Primary Health Care, as it is an integral part of the national health system. District Health System comprises of a population living within a clearly delineated administrative geographical area (Department of Health, 1995). The Alma Ata Declaration stressed the need for health to be at Primary Health care level and to be accessible to all people and

therefore District Health System is a framework for its implementation (WHO, 1978). According to WHO (1978) Community participation in the planning, provision, control and monitoring of health services is essential. The health system must actively promote health and prevent ill health, and empower individuals and communities to take full responsibility for the promotion and maintenance of their health. This requires that health system be based on developmental and inter-sectoral philosophy, drawing all the various elements required to build healthy individuals and communities. (Department of Health, 1995). Primary health care addresses the main health problems in the community in a District Health System providing promotive, preventive, curative and rehabilitative service accordingly.

### **2.3 HUMAN RESOURCE PLANNING AND DEVELOPMENT**

According to Buchman, Ball and O'May (2000) level and mix of staff deployed is a central element in determining the cost of care and quality of care. These authors describe skill mix as the mix of employees in a post, mix of post in the establishment, combination of skills available at a specific time or combination of activities that comprise each role. Skill mix review requires a broader vision of resource planning and need to be linked to other initiatives and organizational development.



These authors identify approaches to skill mix as follows:

- Task analysis
- Activity analysis / activity sampling
- Daily diary / self-recording
- Case mix / patient dependency
- Re-profiling / re-engineering
- Job analysis interviews / role-review
- Group discussion / brainstorming session

Each approach has its strengths and limitations.

The Government Notice 667 (Department of Health, 1997) states that the skills, experience and expertise of all health personnel should be used optimally to ensure maximum coverage and cost effectiveness. In this regard the composition of primary health care teams is important. N667 (1997) states, that primary health care team need to include unit of health personnel with appropriate skills to deal with common conditions and execute referral to the next level of care. Such team should be based at health units such as clinics and community health centers. These primary health care team members are identified as community health nurses, primary health care nurses, midwives, doctors, enrolled nurses and nursing auxiliaries, oral therapist, psychiatric nurses, clerical and support staff and rehabilitation personnel.

Clinics and health centres are primary level of care and problems that cannot be dealt with at this level must be referred to the secondary level. The primary health care team population of 1:30 000 need to be reduced to 1:15 000 (Department of Health, 1997).

Human resource development is a critical factor in the implementation of health and social development. The South African Government proposed that education and training programmes should be aimed at recruiting and developing personnel who are competent to respond appropriately to the health needs of the people they serve. The co-ordinating education committee for health care education and training programmes is responsible for selection of training all professionals, curriculum review, community based education, integration of educational experiences of different professionals, re-certification and accreditation. Re-certification for competency and safe practice being the responsibility for professional council, that is South African Nursing Council for nurses (Department of Health, 1997).

Tanner (2000) states that the institutions have tried to base content of nursing courses on practice. It is further noted that programmes devised by the individual or group who decide on the content based on their opinions and

experiences rather than reality of nursing practice and therefore are bias. The researcher in the study compared the content of current theatre nursing course devised by individual against the content determined through research observed skill undertaken by nurses and knowledge required to perform those activities.

In the United States of America job analysis studies are conducted by National Council for Licencure Examination so as to form basis of the state board examinations allowing nurses entry to the profession. Large stratification random samples of newly licensed nurses are requested to:-

- Indicate frequency with which they perform each list of nursing activities.
- Rate impact of these activities on maintenance of client safety.
- Provide information about type of setting they work in and types of clients they work with.
- The participants are also asked to do frequency rating and critically rating for each of 222 activity statement. Frequency rating and critical rating are then combined to provide an "importance" rating. The important weight for each of the activities is determined. Data is collected by means of mailed questionnaires, and factor analysis performed to group activities that cluster together. Data is given to the examination committee for interpretation and reflect current practice of nurses (National Council of State Boards of Nursing NCSBN, 1991).



Bland, Starnman, Hembroff, Perlstadt Henry and Richard (1999) initiative involved modification health curricula to include among other things multi-disciplinary instruction shift in training from hospital to community based health centres. These researchers collected data using telephone interviews, mailed survey, focus groups gathered project leader views, skills and knowledge for effective leadership of nurses. According to Burgel, Wallace, Kemeer and Garbin (1997) programmes need to be based on current practice to maintain validity. In job analysis that was performed by American Board for occupational health nurses four approaches were used and they were local analysis, direct observation, critical incident technique and task inventory. Job analysis reflected comprehensive description of diverse knowledge skills needed by occupational health nurses. In South Africa Troskie (1998) evaluated the competency of newly qualified nurses by looking at communication skills, management and clerical skills. The instrument the researcher used for the study was constructed based on number of scales from the literature.

## **2.4 JOB DESCRIPTION OF PRIMARY HEALTH CARE NURSE**

Job description is defined by Booyens (1993) as a written statement of what the jobholder actually does how he or she does it and under what condition the job is performed. In the guide for completion of job description (KwaZulu –Natal Department of Health, unknown) the purposes of a job description are:

## 17.

- To enhance clarity by providing information with regard to job content, the responsibility, and output required. The jobholder clearly understands what is required of her, and how her or his action contributes to achieve the objectives of the organization.
- Facilitate dialogue between supervisor and jobholder, as they need to reach agreement regarding expectations and progress made.
- To improve workflow.
- To serve as basis for human resource processes such as recruitment and selection, performance management, job evaluation and career management.
- To help individual to identify key results areas and performance indicators address barriers. The responsibilities are aligned to the strategic objectives of the organization to improve service delivery.

Therefore job purpose is an accurate short about what the jobholder has to do and why that particular job has to be done.

According to the job description guide (KwaZulu Natal Department of Health, unknown) traditional job descriptions gave lists of the duties, tasks or activities. The guide further stated that the public service regulation (PSR 1999) indicate shift towards describing key responsibilities of the job. It is then up to the health workers to define the most efficient, effective and meaningful ways of doing their job. Notice 667 (Department of Health, 1997) state the services that are to be provided through District Health System and health personnel to provide those services but tasks and function of primary health care nurses are not indicated. In terms of nursing Act 50 of 1978 nurses are expected to function according to the scope of practice of persons who are registered or enrolled under the nursing Act (R2598), registered midwives and enrolled midwives carry their profession according to R2488. The registered nurse has the management function, clinical function, and education function.

**Management Function:** may include

- Record keeping
- Scheduling off duties
- Requisition of equipment, supplies for the clinic including medicine
- Supervise the running of the clinic
- Policy making and interpretation

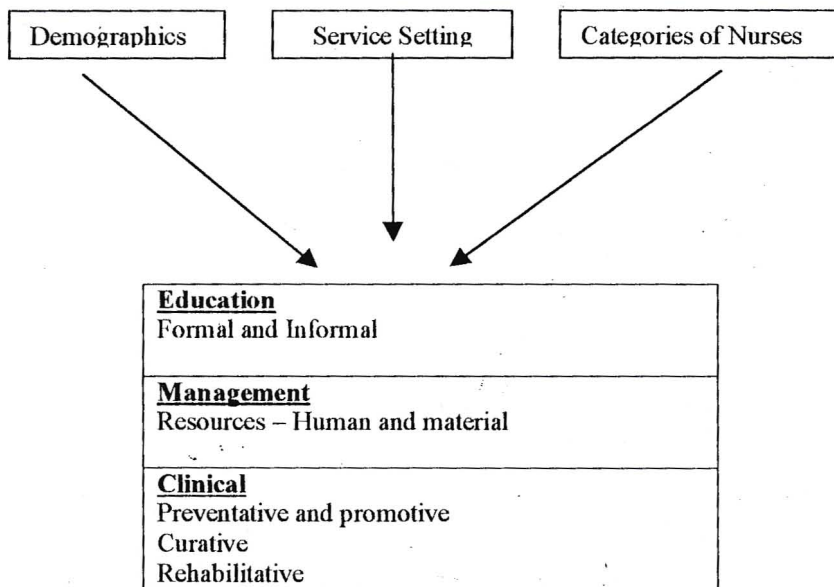
**Clinical Function:** may include

- Assess health status of patients and their families
- Diagnosing and treat minor ailments and injuries
- History taking
- Performing physical examination

**Education Function**

- Conduct and attend in-service education of staff
- Patients, family health education
  - Orientation of staff and patients
- Ensure that educational posters are pasted on the walls for information and education of patients and pamphlets are handed out (Henderson & McGettig, 1986).

Based on the services that must be provided by the nurse, the nurse must function as an educator, manager, and clinician.



**Diagram 1: Conceptual framework for job description of nurses**  
(based on Henderson & McGettig, 1986)

The type of setting the nurse working in and services provided influence the job description and roles of the nurse. According to Henderson & McGettig (1986) each activity the nurse performs requires either educational, managerial, clinical role or the combination. Under educational role the nurse must give both formal and informal education to the staff and patients and her clinical role include

prevention of disease, and promotion of health, curative and rehabilitative health care, The nurse manages both human and material resources.

## 2.5 CONCLUSION

Literature reviewed revealed that Primary Health Care forms an integral part of the District Health System. Primary Health Care is the first level of contact of the individual, family and community with the national health system. Therefore suitably trained health care workers required to function at this level (WHO, 1978). The review of research studies, have shown that no studies on the skills of health care providers, at primary health care level have been done.



## **CHAPTER 3**

### **METHODOLOGY**

#### **3.1 INTRODUCTION**

This chapter discusses the research design, population, sample, data collection instrument, data collection process and ethical considerations.

#### **3.2 RESEARCH DESIGN**

Survey was used to describe priority and important skills / activities used by primary health care nurses. Surveys obtain information from sample of people by means of self-report (Polit and Hungler, 1995). According to Polit and Hungler the advantage of survey is the collection of a large amount of information from a large population in an economical manner. In this study, a mail survey was used because the population of study was large, and survey research was suitable.

### 3.2 POPULATION AND SAMPLE

The population of the study comprised of all nurses working at Primary Health Care (PHC) clinics at Uthukela District. This includes all categories of nurses; registered nurses (RN), enrolled nurses (EN) and enrolled nursing auxiliaries (ENA). The population consists of 269 nurses, excluding PHC co-coordinators.

Two stratified random samples of nurses were drawn from the sample frame of the district. In stratified sampling the population is subdivided into homogenous subsets from which an appropriate number of elements can be selected at random (Polit & Hungler, 1995). In this study stratification was based on different categories of nurses and stratified sampling was used to obtain a greater degree of representativeness (see table 3.1). The names of nurses was drawn from the list at random therefore each nurse had an equal independent chance of being selected. The PHC co-coordinators were excluded as they perform mainly supervisory / managerial functions. It was decided to use a 30% sample, so that even if a 50% return is achieved, there will be enough respondents for valid calculations.



Table 3.1 **SAMPLING METHOD FOR DIFFERENT CATEGORIES OF NURSES**

<b>NURSES</b>	<b>RN</b>	<b>EN</b>	<b>ENA</b>	<b>TOTAL</b>
POPULATION	187	54	28	269
SAMPLE	59	17	8	84

The sample consisted of 84 Primary Health Care Nurses; 59 Registered Nurses, 17 Enrolled Nurses and 8 Enrolled Nursing Auxillaries which were randomly selected from the sample frame of the district. Thirty percent sample was used.

### **3.4 DATA COLLECTION INSTRUMENT**

Data collection methods used in surveys are interviews, telephonic and personal interviews and questionnaires. Interviews are costly and they require considerable planning, time and training of the interviewer (Polit & Hunger, 1995). Interviews were seen as a problem as they would take a long time to complete and the researcher was not trained in interviewing skills

For the current study questionnaires were used to collect data. Questionnaire did not pose a problem because all the subjects were literate and educated and should not experience a problem in understanding it. Instrument was developed based on PHC core package and services provided at PHC clinic and checked

against the list of activities used in the study of job analysis entry level performance of registered nurses (Kane et al, 1986).

Data collection instrument consisted of three sections as follows:-

### **Section One**

This section dealt with demographic data and had 4 questions. The following demographic information about respondent were required:-

- \*Gender

- \*Age

- \*Professional rank

- \*The area where the respondent works

### **Section Two**

This section consisted of a list of activities that describe the nursing practice in a setting. For each activity three questions were asked:-

#### **Question A**

The respondent had to indicate whether the activity applies to his/her setting or he/she has responsibility in this regard.

### Question B

The respondent had to indicate the frequency of performing the activity as follows:-

- \*Less than 1 per week
- \*1-5 per week
- \*6-10 per week
- \*Over 10 per week

### Question C

The respondent had to indicate the importance of the activity, whether it could sometimes be omitted or could not be omitted.

## Section Three

The third section dealt with activities that the respondent perform but were not included in the list provided (See Annexure A).

The instrument was checked for clarity by three experts.

**Reliability** is a degree of consistency or dependability with which an instrument measures the attribute it is designed to measure (Brink, 1990). An instrument that is reliable will produce consistent results or data on repeated use.

The assessment of the stability of the instrument was done during a pilot study using procedure referred to as test-retest reliability. The same questionnaire was administered to the same sample of 5 nurses that were selected for pilot study to complete on two separate occasions at an interval of two weeks and the scores obtained were compared. The results are shown on table 3.2. All items not listed in this table had a 100% correlation between the two measures.

Table 3.2: Items with some difference between ratings.

Correlation	Items
80%	6, 16, 32, 34, 36, 46, 56, 71, 108, 118 (N = 10)
60%	44, 47, 60  (N = 3)

There were 138 items with 100% correlation between measurements, 13 items differed. The average correlation for the whole instrument was 0,91 which indicate a high degree of correlation.

**Validity** is the degree to which an instrument measures what is supposed to measure. Content validity is concerned with the sampling adequacy of the content area being measured (Polit & Hungler, 1993). This was ensured by developing instrument based on Primary Health Care Package and services

provided. Service provided and question description of activities are shown on table 3.3

Table 3.3 PHC service and question description of activities performed

SERVICE	ITEM	QUESTION DESCRIPTION
Preventive and promotive services (n = 45)	1	*History taking
	2	*Modify food and fluid intake to promote fluid and electrolyte
	3	*Assess safety of client's home environment
	4	*Assist a client with personal hygiene
	5	*Assess whether a client is getting adequate emotional support
	6	*Position or turn a patient
	8	*Assess patient and family health status
	9	*Assess patient's health status
	18	*Taking a patient's blood pressure
	19	*Weigh and measure height of a patient
	20	*Assess respiratory status
	31	*Reading patient's blood haemoglobin
	32	*Reading patient's blood glucose by finger prick
	33	*Taking blood samples
	34	*Urinalysis
	41	*Assess cardiovascular status
	42	*Administer immunizing agent
	48	*Oral dehydration
	51	*Prepare patient for investigation
	55	*Counsel patient's and families about chronic conditions such as:
	55.1	* Aids
	55.2	* Hypertension
	55.3	* Asthma
	55.4	* Diab��tes Mellitus
	55.5	* Sexually Transmitted Diseases
	60	*Look for sources of repeated infection
	63	*Record intake and output
	69	*Perform a vaginal-pelvic examination
	70	*Maintain asepsis for client at risk
	73	*Analyze environmental hazards in the community, school or workplace
	74	*Check bowel sounds
	76	*Assess clients attitude toward various birth control methods
	80	*Attach a monitoring equipment to a client
	89	*Assess client's nutrition and hydration status
	91	*Label and prepare specimens for transmission to laboratory
	96	*Obtain specimens from clients for laboratory tests
	99	*Assess clients ability to meet their nutritional needs
	117	*Distribute educational pamphlets
	125	*Arrange the environment to promote clients safety
	126	*Participate in running community projects
	127	*Educate clients with regard to health programme / ill programme
	128	*Assess client's understanding for health and normal growth
	130	*Develop teaching material
	137	*Help the patient to eat
		*Order routine laboratory tests



Curative Service (N = 39)	10 11 12 13 14 15 16 17 21 22 23 25 26 27 28 29 30 36 37 38 39 40 45 46 49 50 54 63 68 75 78 84 90 116 134 136 138	*Classify the health problem *Treat minor ailments independently *Refer a patient to a multi disciplinary team member or other help *Collaborate with team member (nursing) about a patient *Prescription of medication according to essential drug list *Formulate treatment plan *Check with physician about contraindicated medications or treatments *Formulate nursing care plan *Administer oral medication *Administer medication by intramuscular injection *Administer intravenous therapy *Administer oxygen to a patient *Nebulise a patient *Wound care and dressing *Wound closure by suture *Rectal medication *Removal of sutures / clips *Urinary catheterization (men) *Urinary catheterization (woman) *Monitoring for adverse reaction to treatment *Discontinue treatment in cases of adverse reaction *Provide emergency care before referral *Recommend change in drug therapy, bases upon clients behaviour *Introduction of nasogastric tube - (Child or Adult) *Perform cardiopulmonary resuscitation *Eye swabbing and introduction to drops *Educate patients and family about patient's condition *Record intake and output *Plan measures to improve clients appetite *Alter an intravenous infusion rate based on the client's condition *Administer local anaesthesia *Start an intravenous infusion *Take measures to counteract the side effects of medication *Minimize pain or discomfort of patient *Assess the need for administration of p & n medication *Suction a client's respiratory tract *Ask a physician if medical treatment can be modified to meet client's special needs.
Maternal and child health service (N = 8)	46 52 71 72 81 83 93 114	*Introduction of nasogastric tube (newborn) *Deliver newborn *Check the skills of new parents at infant feeding *Teach parenting skills *Conduct prenatal care sessions *Assess maternal and fetal status during labor *Assess newborn *Do antenatal teaching
Mental Health Service (N = 16)	35 55 55.6 55.7 55.8 55.9 57 62 64 65 79 80 86 123 124 129 132	*Encourage client's to task about their feelings *Counsel patients and families about conditions such as *   dementia *   depression *   schizophrenia *   mental retardation *Assess orientation to person, place and time *Record observations of behaviour that indicate a clients mood *Help a client to deal with negative attributes related to illness *Support terminally ill clients and their families *Counsel suspected victims of abuse *Give emotional support to staff *Check a client for signs and symptoms of drug withdrawal *Assess suicide risk *Assess potential risk of patient as a danger to self and others *Arrange for spiritual support during life transitions or crises *Conduct a group session for client with psychiatric disorders



Rehabilitative Service (B = 10)	7	*Develop plans for client's discharge
	44	*Plan alternative methods of communication for a client with hearing, Speech or vision problems
	56	*Check a client for complications due to immobility
	59	*Compare a physically development of a client to normal
	66	*Take measures to prevent respiratory complications
	67	*Assess client's adjustment due to changes in the body image
		*Plan measures to improve a client's appetite
	82	Counsel a client with urinary and bowel incontinence
	87	*Teach a client how to do exercises
	94	*Help a client to do activities of daily living
Planning and Management (N = 33)	49	*Verify that a client or family has information needed for informed consent
	53	*Plan health care with the patient
	61	*instruct staff on the need for client confidentiality
	85	*Identify differences between client's views of their conditions and medical view.
	88	*Check the accuracy of orders and clients data
	92	*Participate in a multi disciplinary team conference in planning case
	95	*Use reference material to check on expected effects of therapy
	97	*Issue drugs from the drug storeroom to consulting rooms
	98	*Carry out drug stock management in the drug store (tidy stock, check balance against cards and check expiry dates)
	101	*Schedule / assist in planning staff duty roster
	102	*Ordering of medicines
	103	*Requisition of equipment and supplies
	104	*Record keeping
	105	*Supervise subordinates
	106	*Orientate new staff
	107	*Plan work allocation
	108	*Attend community meetings
	109	*Attend multi disciplinary discussion
	110	*Identify staff training needs
	111	*Conduct staff in-service training
	112	*Attend in-service training
	113	*Handing over case of a patient/s to other nurses
	115	*Evaluate staff member's understanding of procedures and policies
	119	*Check for functioning of all equipment
	120	*Document treatment errors or accidents
	121	*Assist in planning a disaster programme
	122	*Record / report changes in a client condition
	125	*Participate in running community projects
	135	*Evaluate a client's use of home remedies and over-the-counter drugs
	139	*Intervene in situations involving unsafe or inadequate case
	140	*Refer to research literature in planning case
	141	*Evaluate client's compliance with prescribed therapy

Number of items for all categories is 151.

Some items address more than one category. As a result some categories have more items than others. Table 3.4 indicate items that overlap. Since all categories of the PHC package were well represented in the instrument, and provision was made for respondents to add items, it can be argued that the instrument was valid.

Table .3.4 Categories and overlapping items

Service Categories	Item	Question description
Preventive and promotive Curative	2	*Modify fluid intake to promote fluid and electrolyte balance
	48	*Oral dehydration
	58	*Counsel patient and families about acute conditions such as:
	58.1	* Gastro-enteritis
	58.2	* Measles
	58.3	* Tuberculosis
	55	*Counsel patient and families about chronic conditions such as:
	55.1	* AIDS
	55.2	* Hypertension
	55.3	* Asthma
	55.4	* Diabètes Mellitus
	55.5	* Sexually Transmitted Diseases
Preventative and promotive Maternal and child health	63	*Record intake and output
	136	*Suction a client respiratory tract
	69	*Perform a vaginal-pelvic examination
	72	*Teach parenting skills
Preventative and promotive Rehabilitation	76	*Assess clients attitude toward various birth control methods
	114	*Do antenatal teaching
	53	*Plan patients' health care with him/her
	54	*Educate patient and family about patient's condition
	79	*Counsel suspected victims of abuse
	87	*Teach a client how to do exercise
	94	*Help a client to do activities of daily living

3.5 DATA COLLECTION PROCEDURE

The questionnaires and the covering letter explaining the research and asking for participation (see Annexure A) were mailed to randomly selected subjects. For the nearby clinics questionnaires and covering letter were personally handed out. Respondents were supplied with self-addressed envelopes with stamps to return the completed questionnaires and were given four weeks to complete the questionnaire and were reminded telephonically after two weeks those who forgot to return them.

Two months later the same questionnaire was sent to the second sample. This gave enough time for nurses working in the same setting to complete the questionnaire without copying from each other.

### **3.6 ETHICAL CONSIDERATION**

Permission for the study was obtained from the KwaZulu Natal Department of Health and Uthukela Research Committee. The study was approved by the Ethical Research Committee of Faculty for the Community and Development Disciplines.

The randomly selected nurses were approached by mailing a covering letter explaining the research and asking them to participate (Annexure A). Issues of confidentiality and anonymity were maintained by asking respondents not to write their personal information that would identify them directly, like names and addresses.

### 3.7 CONCLUSION

It was clear from this chapter that random selection of nurses gave each nurse an equal chance of being selected for the study. Stratified samples used to obtain greater degree of representativeness all categories of nurses. Pilot study conducted to assess the reliability of the instrument. Test-retest results reflected that the instrument had high degree of correlation, therefore it was reliable to be used for data collection.

## **CHAPTER 4**

### **RESULTS**

#### **4.1 INTRODUCTION**

This chapter discusses the sample description, and reports on each item. The data analysis was done on questionnaires returned using computer programme called Statistical Package for Social Sciences (SPSS).

#### **4.2 SAMPLE DESCRIPTION**

The population of the study consisted of 269 nurses; 187 registered nurses, 54 enrolled nurses and 28 enrolled nursing auxiliaries. The sample drawn consisted of 84 nurses of which 59 (30%) were registered nurses, 17 (31%) enrolled nurses and 8 (29%) nursing auxiliary.

Sixty-one questionnaires were returned out of 84 questionnaires that were sent out. The response rate was 72%.

**Gender and Workplace**

It was clear from returned questionnaires that 16% (n 9) female nurses were working in the community health center, 64.2% (n 36) working in the fixed clinics and 19.6% (n 11) working in a mobile clinic. Three male nurses all working in fixed clinics. Two questionnaires were returned without gender indicated and these two will not show in table 4.1. Gender and workplace are shown in table 4.1.

Table 4.1 Gender and Workplace Description

WORKPLACE	GENDER		TOTAL
	FEMALE	MALE	
Community Health Centre	9 (16%)	0	9 (16%)
Fixed Clinic	36 (64,2%)	3 (5.2%)	39 (66.1%)
Mobile Clinic	11 (18.6%)	0	11 (18.6%)

Male and female nurses were unequal distributed, with the female nurses predominated, as they are in the profession.



Workplace and age description

The age distribution of nurses is reflected in table 4.2 Age was not indicated in one questionnaire and therefore will not show as respondent in table 4.2.

Table 4.2: Age and workplace description (n = 60)

AGES	WORKPLACE WITH ROW %						TOTAL COLUMN %	
	COMMUNITY HEALTH CENTRE		FIXED CLINIC		MOBILE CLINIC			
25 – 29	3	50%	3	50%	0	0	6	10%
30 – 34	1	6.6%	9	60%	5	33%	15	25%
35 – 39	3	37.5%	4	50%	1	12.5%	8	13.3%
40 – 44	2	22.2%	7	77.7%	0	0	9	15%
45 – 49	1	11.1%	6	66.7%	2	22.2%	9	15.7%
50 +	0	0	10	77%	3	23%	13	21.7%
TOTAL	10		39		11		60	

Nurses working at primary health care services most often fall into the age group 30-34 with 25% followed by age group 50 and above (21.7%). Other age groups are relatively equally distributed. Nurses under 30 years of age are low at all sites. In a fixed, and mobile clinics age group 30-34 is quite high.

**Rank and Workplace**

The questionnaires were completed by different categories of nurses. Forty (66.6%) were registered nurses, with 9 working in community health centers, 24 in fixed clinics and 7 in, mobile clinics (see table 4.3). One questionnaire returned without rank indicated and therefore will not show as respondent in table 4.3.

Table 4.3 Rank and workplace description

RANK	WORKPLACE			TOTAL
	COMMUNITY HEALTH CENTRE	FIXED CLINIC	MOBILE CLINIC	
RN	9	24	7	40 (66.7%)
EN	0	13	3	16 (26.7%)
ENA	0	3	1	4 (6.7%)
TOTAL	9	40	11	60 (100%)

The population consisted of 70% of registered nurses, 20% of enrolled nurses and 10% of enrolled nursing auxiliary. All different categories of nurses were adequately represented.

### 4.3 ITEM ANALYSIS

Items were analyzed according to the frequency and importance of the task performed as rated by the nurses. Missing referred to the number of respondents who did not rate the specific task

#### 4.3.1 Task frequency

The tasks performed covered the services that are provided at Primary Health Care clinics. The rating of frequency of each task is presented in ANNEXURE B. Eleven items were rated as very frequently performed tasks, performed 6 or more times per week by more than 70% of nurses. Six were assessment tasks, one treatment task, three counseling and one preventive and promotive task. The frequently performed tasks were forty-four items, performed 1 or more times per week as rated by 50% and above nurses.

Very rarely performed task was urinary catheterization (men) as rated by 80% of nurses. Rarely performed tasks were those related to equipment, multi-disciplinary team, maternity and preparation of a patient as rated by 50% and above nurses.

### Clinical tasks

Preventive and promotive service.

Out of 45 tasks that were listed, three assessment tasks were rated <sup>as performed</sup> more than 10 times per week by 70% of nurses. These were; (1) history taking, (18) taking patient's blood pressure and (19) weigh and measure height of a patient.

"Assessing patients health status" (8), (34) "urinalysis", (42) "administration immunizing agent" done more than ten times per week by 67.2% nurses followed by (55.5) counseling of client and family about sexual transmitted disease, done more than ten times per week by 65.6% of nurses. The counseling of client and family about chronic disease hypertension performed ten times per week by 60.7% of nurses as compared to 54.1% who counsel clients with acute condition (58.3) tuberculosis and chronic condition (55.4) diabetes more than 10 times per week. Assessing respiratory status (20) and formulation of a treatment plan (15) did more than ten times by 50.8% of nurses.

Sixty six percent of respondents agreed that (6) positioning of client and (51) preparing client for investigations or operations did not apply in their settings.

The results showed that all the tasks that are related to screening of patients are done most frequently than others, that is, over 10 per week.

## Curative Service

Treating minor ailments independently (11) rated high with 70.5% of respondents who perform that task more than ten times per week as compared to 6.6% who perform tasks 6 to 10 times per week and 9.8% who said that task did not apply. Sixty two percent of nurses prescribe medication according to essential drug list (14) and that did not apply to 29.5% of nurses. Administration of medication by intramuscular injection (22), performed more than ten per week by 50.8% followed by 41% of nurses administering oral medication (21) with lower rating of intravenous therapy (23) which is performed 1 - 5 per week by 34.4%, and (25) oxygen therapy by 36.1%. Nebulization of patient (26) done only less than one per week by 37.7%.

The results showed that only 32.8% of nurses provide emergency care to patients before referral over 10 times per week followed by 24.6% of 1 – 5 per week.

Forty three percent nurses monitor for adverse reaction to treatment (38) over 10 per week and 58.3% discontinue treatment in cases of adverse reaction (39) as compared to 15% who said this did not apply to them. The findings showed that



only 36.1% of nurses formulate a nursing care plan (17) over 10 times per week, this did not apply to 19.7%.

#### Maternal and Child Health Service

All the tasks related to maternal and child health services were rated very low of all below 50% of nurses. Only 44.3% conduct prenatal care sessions (81) more than 10 times per week and that did not apply to 27.9% of nurses. Thirty eight percent do antenatal teaching (114) over 10 times per week, and 31.1% teach parenting skills (72) 1 –5 times per week and over 10 per week respectively.

#### Mental Health Services

The average of 34% of nurses, counsel clients and families with (55.6) dementia, (55.7) depression, (55.8) schizophrenia and (55.9) mental retardation less than one time per week. Fifty percent of nurses assess suicide risk (123) less than one per week. The conduct of group session for client with psychiatric disorders (132) did not apply to 50.8% of nurses working in the primary health care clinics.



## Rehabilitative Services

Forty seven percent of nurses stated that they plan alternative methods of communication for a client with hearing, speech or vision problems, (44) less than one per week. Only 39.3% teach a client how to do exercises (87) less than 1 per week. The overall frequency of task performed for rehabilitative service was less than 1 per week.

## Planning and Management

The findings showed that the only higher percentage of 55.7% of nurses (112) attend in service training less than one per week followed by (104) record keeping with 54.1% done more than 10 per week. The requisition of supplies (103) ~~done~~ less than one per week by 45.9% of nurses. Average of 34.4% distribute educational pamphlets (99), and supervise subordinates (105) less than 1 time per week.

### 4.3.2 Task Importance

The percentages of rating of importance of tasks are presented in ANNEXURE C. No task was rated as important (never to be omitted) by 70% and above

nurses. Twenty-seven tasks were rated as important by 50% and above nurses. Six were assessment tasks, eight treatment tasks, six counseling tasks, six management and one related to preparing specimens.

### **Clinical Tasks**

#### **Preventive and promotive service**

Thirty-six (80%) out of forty-five items were rated as important and they "can never be omitted" and 9 (20%) rated as "can sometimes be omitted". Assessment of patient health status (8) was rated as can never omit by 63% of nurses. Fifty six percent of nurses stated that (18) taking patients blood pressure (20) assessing respiratory status (55.5) counseling patient and families with sexually transmitted diseases can never be omitted. Average of 50.8% agreed that counseling of patients and families with diseases like (55.2) hypertension, (55.4) diabetes mellitus, (58.3) tuberculosis as well as (80) assessing the nutritional and hydration status of the patient can never be omitted. Fifty four percent stated oral rehydration can never be omitted.

This clearly showed that preventive and promotive services are important at primary health care level. Primary Health Care nurses work independently and

they play an important role in prevention of diseases and promotion of health as a first level of contact with the patients, families and communities.

#### Curative Services

Fifty six percent of nurses agreed that (11) treating minor ailments independently and (10) classifying the health problem/s are important and can never be omitted. This is because there are no doctors at the clinics and the nurses have to diagnose and treat patients. The (14) prescription of treatment according to essential drug lists was seen as can never be omitted by 52.5% of nurses. The results showed that the (22) administration of intravascular injection can never be omitted as rated by 65.1% of nurses as compared to 41% of oral medication.

Basic nursing care procedures like (27) wound care and dressing, (28) wound closure by suture, (30) removal of sutures/clips, (68) plan measures to improve clients appetite and (70) maintaining asepsis for clients at risk were all seen as important and can never be omitted by average of forty three percent. Performing cardio-pulmonary resuscitations (49) was seen as can never be omitted. This could be due to the fact that it is performed under life threatening

circumstances where life is at stake and a patient could die if nothing is done immediately to bring it back and preserve it.

#### Maternal and Child Health Service

The introduction of nasogastric tube in newborn was stated as did not apply by fifty nine percent of nurses. This could be attributed to the fact that only normal deliveries without complications or risks are conducted at the primary health care clinics and all those that are at risk and sick babies are referred to the hospital for delivery and management. Only thirty three percent of nurses said that delivering a newborn can never be omitted as compared to forty nine percent of nurses that indicated that did not apply in their setting. This may be due to the fact that mobile clinics and other clinics don't conduct deliveries. The same results are seen in assessing maternal and fetal status during labour.

#### Mental Health Service

Only thirty nine percent of nurses reflected that assessment of orientation to person, place and time can never be omitted. This is a discrepancy because one would expect to find a higher percent in this regard as most of the acute mental ill

patients and those on follow up treatment are attended to at the clinics before being referred to the hospital. Thirty one percent of the missing data might have contributed to these results. The counseling of clients and families of patients with dementia, depression, schizophrenia and mental retardation rated as can never to omitted by average of 40% of nurses.

#### Rehabilitative Services

Teaching the client how to do exercises was noted by only thirty three percent of nurses as "can never omit". All other tasks related to rehabilitation were rated equally between can sometimes omit and can never omit.

#### Planning and Management and Education

Fifty three percent of nurses indicated that the evaluation of client's compliance with prescribed medication could never be omitted. This is evident in the same percentage of nurses who treat minor ailments independently and prescribe medication for clients and give follow up medication to clients with chronic diseases. Handing over care of a patient/s to other nurses was seen as could never be omitted by 56% of nurses to ensure continuity of care. Record keeping,



was rated by 64% nurses as can never be omitted as well as orientation of new staff.

### **Additional Items**

The following six items were added by respondents:

- Relieving the clerk
- Writing patients cards/birth notifications
- Removing the foreign body
- Assisting doctor/dentist
- Bathing newborn
- Driving a mobile clinic

Three items were non-nursing tasks, one related to teamwork, one nursing care task, one treatment/curative task.

### **4.3.3 Frequency-Importance Index**

To calculate the frequency – importance index, the following procedure was followed:

- Frequency were allocated marks; less than 1 per week = 1, 1-5 per week =2, 6-10 per week =3, over 10 per week = 4



- The importance were allocated marks; can sometimes omit = 1,  
Can never omit =2
- The average frequency and average importance for each item was calculated.
- The mean frequency of the tasks performed was multiplied by 1 mean importance of the tasks performed. This is called the frequency – importance index.

The total mean score was 3.02 and standard deviation was 2.26. The results of all items are reflected in ANNEXURE D. Table 4.4 shows a summarized version of the frequency – importance index of items.

It would seem that only 16 items (12,6%) rate above 1 standard deviation of the mean. These represent mainly clinical with only 2 management and none education. Of the clinical items (16), 7 focus on assessment, 6 on counseling and teaching, 2 on diagnosing and planning and 1 on treatment.

Forty three point seven percent (43.7%) of the items fall above the average, and only 21 (13,9%) fall under – 1 standard deviation. The remaining 141 items could all be categorized as having to be included in both training and supervision.

Table 4.4: Frequency - Importance Index Frequency

ITEMS SCORE	NUMBER	%	CUMMULATIVE % IMPORTANCE
0 – 1	21	13.9	100
1.1 - 2	37	24.5	86.1
2.1 – 3	27	17.9	61.6
3.1 – 4	26	17.2	43.7
4.1 – 5	21	13.9	26.5
5.1 – 10	16	10.6	12.6
11 +	3	2	2

Three items scored very high 16 items scored high in frequency – importance index.

#### 4.4 CONCLUSION

The total averages showed that the tasks that are related to promotion of health and prevention of disease are done more frequently that is, more than ten times per week. History taking, taking patients blood pressure and weigh and measure height of the patient were rated the highest by more than 70% of nurses, followed by administration of immunizing agent, assessing patient health status by 67.2%.

Seventy one percent of listed tasks were rated as "can never omit" and fifty percent done more than ten times per week.

## **CHAPTER 5**

### **CONCLUSION AND RECOMMENDATION**

#### **5.1 INTRODUCTION**

The purpose of the study was to do a task analysis of Primary Health Care nurses practice by identifying the skills required by nurses at the primary health care clinic in order to plan staff development programme. The objectives were: to compile extensive lists of possible tasks; engage Primary Health Care nurses identifying the frequency of tasks executed; engage Primary Health Care nurses in determining how important are tasks in their practice.

A mail survey was used to collect data. The sample population consisted of eighty-four primary health care nurses; fifty-nine registered nurses, seventeen enrolled nurses and eight enrolled nursing auxiliaries. Stratified random sampling was used to draw nurses from the sample frame of the district.

## 5.2 DISCUSSION

A total of 151 tasks were listed. The results show that eleven items were rated very frequent by 70% of nurses. It also shows that twenty seven items were important by 50% of nurses. In terms of the frequency and importance, nineteen items score above 1 standard deviation on this index.

The nurse has a clinical, education and management function (McGettig & Henderson, 1986). According to the results of this study the clinical tasks predominated. This clearly shows that many nurses who are working at Primary Health Care are clinicians and perform mainly clinical tasks and only few nurses perform managerial and education tasks.

In the clinical tasks, preventive and promotive service predominated. A high percentage of these tasks were done very frequently and were seen as important, especially assessment and counseling of patients. This show that clinics mostly provide promotive and preventive service and indicate that nurses have internalized the philosophy of Primary Health Care approach. According to WHO (1978) Primary Health Care addresses the main health problems in the community, providing promotive, preventive service which encompasses health

education, nutrition, family planning, immunization and screening for common diseases.

Certain aspects were rated low in both frequency and importance of tasks. Tasks related to rehabilitative service were all rated low by more than fifty percent of nurses. This is a discrepancy because rehabilitative services are part of the Primary Health Care Services. Maternal and child health tasks were also rated very low below fifty percent of nurses. This could be attributed to the fact that mobile clinics and some fixed clinics don't conduct deliveries. All the clients that are in labour are referred to hospitals or to those clinics that have a labour ward. But it can be argued that even those tasks that are about antenatal teaching rated low, when one would expect higher rating. The importance and frequency of the mental health service tasks were also rated lower. This is a discrepancy because one would expect to find a higher rating in this regard as most of the acute mentally ill patients and those on follow up treatment are attended to at the clinics and those who need referral to hospitals are referred after having been seen at the local clinic. It would therefore seem that midwifery, psychiatric and rehabilitation services get inadequate attention.



## **5.5 RECOMMENDATIONS**

### **Recommendation for Nursing Education.**

The curriculum for the training of nurses should be based on Primary Health Care approach as it forms an integral part of the country's health system to prepare nurses to work at PHC clinics. The tasks reflected in this study, and the emphasis it shows, should be mirrored in educational programmes. Nurses working at the primary health care clinics should be involved in curriculum planning of student nurses.

### **Recommendation for Service**

Community based rehabilitation, community psychiatric services need to be stressed and to be supported by Primary Health Care nurses, as part of preventive, promotive functions, with proper screening and assessment. All clinics need to provide antenatal teaching to pregnant women to lessen the burden experienced by midwives when the mother is in labour.

In-service education should be given to all nurses about importance of prescribing treatment according to Essential Drug List. The nurses in charge of

Primary Health Care clinics should ensure that all the nurses have a copy of the Essential Drug Lists book and they are using it.

### **Recommendation for future research**

Further analysis of different roles of enrolled nurses and registered nurses need to be done.

### **5.3 CONCLUSION**

All the tasks that are performed by primary health care nurses in a district health system are important. The study have identified the task that are used more frequently than others as well as those that are more important. Preventive and promotive tasks predominated all tasks performed.

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## ANNEXURE A

60.

Covering letter and questionnaire.

Olivershoek Clinic  
P/Bag X1664  
Bergville  
3350

Dear Colleague

### **RE: REQUEST FOR NURSES PARTICIPATION IN A RESEARCH STUDY**

I am doing a research project with the title "Skills required by nurses at Primary Health Care level in a District Health System".

The aim of the study is to identify the skills required by nurses working at the primary health care clinics in order to assist in planning staff development program. Data from nurses will be collected and analysed.

The project has been approved by the Department of health. You have been randomly selected to participate in this study. If you are willing to participate, I would appreciate if you would complete the questionnaire. Do not write your name anywhere in the questionnaire, so that your participation will remain anonymous. All the information gathered will be used for the research and will be handled strictly confidentially.

Return the questionnaire in the enclosed self-addressed envelope.

Your participation will be highly appreciated.

Thank you



**E.S. Mbambo (Miss)**

**ANNEXURE A****SURVEY OF NURSING PRACTICE****SECTION ONE: DEMOGRAPHICS****THE FIRST FEW QUESTIONS DEALS WITH YOU AND THE  
SETTING IN WHICH YOU WORK.**

1. Gender Female ☐ Male ☐
2. Age \_\_\_\_\_
3. Professional Rank
- |                            |                          |
|----------------------------|--------------------------|
| Enrolled Nursing auxiliary | <input type="checkbox"/> |
| Enrolled nurse             | <input type="checkbox"/> |
| Registered nurse           | <input type="checkbox"/> |
4. Where do you work
- |                         |                          |
|-------------------------|--------------------------|
| Community Health Centre | <input type="checkbox"/> |
| Clinic                  | <input type="checkbox"/> |
| Mobile Clinic           | <input type="checkbox"/> |

## SECTION TWO ACTIVITIES PERFORMED

**Instructions :** This section contains a list of activities that describe nursing practice in a variety of settings. Do not be surprised if some activities do not apply to your setting. For each activity, three questions are asked. In answering the questions, it may be helpful to think about a recent work week.

**Question A - Does not apply :** If the activity does not apply to your setting or you have no responsibility for the activity, mark the circle in column A and skip the next activity; do not answer questions B or C for the activity. If the activity does apply to your setting, leave the circle in column A blank and answer question B and C.

**Question B - Frequency :** How often do you personally perform the activity per week? Count all occasions when you perform the activity yourself. Do not count occasions when you delegate the activity to someone else.

- **Less than 1 per week.** I perform this less than once a week.
- **1 - 5 per week.** I perform this activity 1 to 5 times per week.
- **6 - 10 per week.** 6 to 10 times per week
- **Over 10 per week.** I perform this activity more than 10 times per week.

**Question C - Impact :** Could the activity be omitted on some occasions when it is performed, without having major impact on the clients well-being? All the activities are designed to help client, but some activities are more critical than others.

- **Can sometimes omit.** The activity can sometimes be omitted for some clients without a substantial risk of unnecessary complications, impairment of function, or serious distress.
- **Can never omit.** The activity could NEVER be omitted without a substantial risk of unnecessary complications, impairment of function, or serious distress.

Please answer question A or question B and C for each activity. Examples I And II show you how to respond.

**Example I** represents an activity that does not apply to your setting. The oval under A is filled in. No other responses are made for this activity.

**Example II** represents an activity that does apply to your setting. The response to question B indicates that you usually perform the activity between **6 and 10 times per week**. The response to question C indicates that this activity **can sometimes be omitted** without serious consequences.

As used here, the “client” can be an individual or an individual plus family (or significant others).

The list of activities begins below, after the two examples, and continue on the following pages.



		A	B	C
		Does not Apply	Less Than 1/ Week 1-5 / Week 6-10 / Week Over 10/ Week	Can Sometimes omit Can never omit
<b>Example I</b>		●	○ ○ ○ ○ ○	○ ○
<b>Example II</b>		○	○ ○ ● ○ ○	● ○
1	History taking	○	○ ○ ○ ○ ○	○ ○
2	Modify food and fluid intake to promote fluid and electrolyte	○	○ ○ ○ ○ ○	○ ○
3	Assess the safety of a clients home environment	○	○ ○ ○ ○ ○	○ ○
4	Assist a client with personal hygiene	○	○ ○ ○ ○ ○	○ ○
5	Assess whether client is getting adequate emotional support	○	○ ○ ○ ○ ○	○ ○
6	Position or turn a client	○	○ ○ ○ ○ ○	○ ○
7	Develop plans for clients discharge or transfer	○	○ ○ ○ ○ ○	○ ○
8	Assess patients health status	○	○ ○ ○ ○ ○	○ ○
9	Assess family's health status	○	○ ○ ○ ○ ○	○ ○
10	Classify the health problem/s	○	○ ○ ○ ○ ○	○ ○
11	Treat minor ailments independently	○	○ ○ ○ ○ ○	○ ○
12	Refer patient to a multi disciplinary team member or other help	○	○ ○ ○ ○ ○	○ ○
13	Collaborate with team member (nursing) about a patient	○	○ ○ ○ ○ ○	○ ○
14	Prescription of medication according to Essential Drug List	○	○ ○ ○ ○ ○	○ ○
15	Formulate a treatment plan	○	○ ○ ○ ○ ○	○ ○
16	Check with physician about contraindicated medications or treatments	○	○ ○ ○ ○ ○	○ ○
17	Formulate a Nursing Care Plan	○	○ ○ ○ ○ ○	○ ○
18	Taking a Patients Blood Pressure	○	○ ○ ○ ○ ○	○ ○
19	Weigh and measure height of a patient	○	○ ○ ○ ○ ○	○ ○
20	Assess respiratory status	○	○ ○ ○ ○ ○	○ ○
21	Administer oral medication	○	○ ○ ○ ○ ○	○ ○
22	Administer medication by intramuscular injection	○	○ ○ ○ ○ ○	○ ○
23	Administer intravenous therapy	○	○ ○ ○ ○ ○	○ ○
24	Suturing of perineum	○	○ ○ ○ ○ ○	○ ○
25	Administer oxygen to patient	○	○ ○ ○ ○ ○	○ ○
26	Nebulise a patient	○	○ ○ ○ ○ ○	○ ○
27	Wound care and dressing	○	○ ○ ○ ○ ○	○ ○
28	Wound closure by suture	○	○ ○ ○ ○ ○	○ ○
29	Rectal medication	○	○ ○ ○ ○ ○	○ ○

		A	B	C
		Does not Apply	Less Than 1/ Week 1-5 / Week 6-10 / Week Over 10/ Week	Can Sometimes omit Can never omit
30	Removal of sutures / clips	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
31	Reading patients blood haemoglobin	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
32	Reading patients glucose by finger prick	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
33	Taking blood samples	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
34	Urinalysis	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
35	Encourage clients to talk about their feelings	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
36	Urinary catheterisation (men)	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
37	Urinary catheterisation (women)	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
38	Monitoring for adverse reaction to treatment	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
39	Discontinue treatment in cases if adverse reaction	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
40	Provide emergency care before referral	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
41	Assess cardiovascular status	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
42	Administer an immunizing agent	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
43	Verify that a client or family has information needed for informed consent	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
44	Plan alternative methods of communication for a client with hearing, speech or vision problem	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
45	Recommend a change in drug therapy based upon client's behaviour	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
46	Introduction of nasogastric tube (newborn)	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
47	Introduction of nasogastric tube (child or adult)	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
48	Oral hydration	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
49	Perform cardiopulmonary resuscitation	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
50	Eye swabbing and introduction of drops	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
51	Prepare a patient for investigations or operations	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
52	Deliver a newborn	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
53	Plan patient's health care with him/her	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
54	Educate patients and family about patient's condition	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>



		A	B	C
		Does not Apply	Less Than 1/ Week 1-5 / Week 6-10 / Week Over 10/ Week	Can Sometimes omit Can never omit
55	Counsel patients and families about chronic conditions such as:	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
55.1	AIDS	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
55.2	Hypertension	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
55.3	Asthma	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
55.4	Diabetes	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
55.5	Sexually Transmitted Diseases	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
55.6	Dementia	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
55.7	Depression	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
55.8	Schizophrenia	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
55.9	Mental Retardation	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
56	Check a client for complications due to immobility	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
57	Assess orientation to person, place and time	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
58	Counsel patients and families about acute conditions such as:	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
58.1	Gastro-enteritis	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
58.2	Measles	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
58.3	Tuberculosis	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
59	Compare the physical development of a client to normal	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
60	Look for the source of a repeated infection	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
61	Instruct staff on the need for client confidentiality	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
62	Record observations of behaviour that indicate a client's mood	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
63	Record intake and output	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
64	Help a client to deal with negative attitudes related to illness	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
65	Support terminally ill clients and their families	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
66	Take measures to prevent respiratory complications	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
67	Assess a client's adjustment to changes in the body image	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
68	Plan measures to improve a client's appetite	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
69	Perform a vaginal-pelvic examination	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
70	Maintain asepsis for clients at risk	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
71	Check the skill of new parents at infant feeding	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
72	Teaching parenting skills	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>



		A	B	C
		Does not Apply	Less Than 1/ Week 1-5 / Week 6-10 / Week Over 10/ Week	Can Sometimes omit Can never omit
73	Analyse environmental hazards in the community, school or workplace	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
74	Check bowel sounds	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
75	Alter an intravenous infusion rate based on the client's condition	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
76	Assess client's attitude toward various birth control methods	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
77	Attach monitoring equipment to a client	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
78	Administer local anesthesia	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
79	Counsel suspected victims of abuse	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
80	Assess a client's nutrition and hydration status	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
81	Conduct prenatal care session	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
82	Counsel a client with urinary or bowel incontinence	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
83	Assess maternal and fetal status during labour	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
84	Start an intravenous infusion	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
85	Identify differences between client's views of their conditions and the medical view	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
86	Counsel a client with a drug/alcohol problem	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
87	Teach a client how to do exercises	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
88	Check the accuracy of orders and client data	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
89	Label and prepare specimens for transmission to the laboratory	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
90	Take measures to counteract the effects of poisons or the side effects of medications	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
91	Obtain specimens from clients for laboratory tests	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
92	Participate in a multi disciplinary team conference in planning	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
93	Assess a newborn	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
94	Help a client to do activities of daily living	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
95	Use reference material to check on expected effects of therapy	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
96	Assess clients' ability to meet their nutritional needs	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>

		A	B	C
		Does not Apply	Less Than 1/ Week 1-5 / Week 6-10 / Week Over 10/ Week	Can Sometimes omit Can never omit
97	Issue drugs from the drug storeroom to consulting rooms	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
98	Carry out drug stock management in the drug store(tidy stock, <sup>1</sup> check balances against cards and check expiry dates)	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
99	Distribute educational pamphlets	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
101	Schedule/assist in planning staff duty roster	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
102	Ordering of medicine	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
103	Requisitioning of equipment and supplies	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
104	Record keeping	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
105	Supervise subordinates	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
106	Orientate new staff	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
107	Plan work allocation	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
108	Attend community meetings	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
109	Attend multi disciplinary discussions	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
110	Identify staff training needs	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
111	Conduct staff in-service training	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
112	Attend in-service training	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
113	Handing over care of a patient/s to other nurses	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
114	Do antenatal teaching	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
115	Evaluate staff member's understanding of procedures and policies	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
116	Minimize pain or discomfort of patient	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
117	Arrange the environment to promote client safety	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
118	Give emotional support to staff	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
119	Check for functioning of all equipment	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
120	Document treatment errors or accidents	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
121	Assist in planning a disaster programme	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
122	Record/report changes in client's condition	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
123	Assess suicide risk	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
124	Assess potential risk of patient as a danger to self and others	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
125	Participate in running community project	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
126	Educate client with regard to health programme/ill programme	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
127	Assess client understanding for health and normal growth	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>

		A	B	C
		Does not Apply	Less Than 1 / Week 1-5 / Week 6-10 / Week	Can Sometimes omit Can never omit
129	Arrange for spiritual support during life transitions or crises	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
130	Help a client to eat	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
131	Check a client for signs and symptoms of alcohol/drug withdrawal	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
132	Conduct a group session for client with psychiatric disorders	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
133	Engage a client in individual counselling	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
134	Assess the need for administration of prn medication	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
135	Evaluate a client's use of home remedies and over-the-counter drugs	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
136	Suction a client's respiratory tract	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
137	Order routine laboratory tests	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
138	Ask a physician if medication can be modified to meet a client's special needs	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
139	Intervene in situations involving unsafe or inadequate care	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
140	Refer to research literature in planning care	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
141	Evaluate client's compliance with prescribed therapy	<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>



**Section three**

Please list any activities which you perform and which are **NOT** in this list. Also give rating for each.

		A	B	C
		Does not Apply	Less Than 1 / Week 1-5 / Week 6-10 / Week	Can Sometimes omit Can never omit
1		<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
2		<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
3		<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
4		<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
5		<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
6		<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
7		<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
8		<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
9		<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
10		<input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>

Thank you for your participation.

## Annexure B

### Frequency of task performed

Frequency of task

Key: Very frequent: Bold row  
Frequent : Bold numbers

	Tasks	Does not apply	Less than 1 per week	1-5 per week	6-10 per week	Over 10 per week	Missing	Total
1	<b>History taking</b>	<b>3</b> 4.9%	<b>1</b> 1.6%	<b>2</b> 3.3%	<b>1</b> 1.6%	<b>43</b> 70.5%	<b>11</b> 18.0%	<b>61</b> 100.0%
2	Modify food and Fluid intake to promote fluid and electrolyte	8 13.1%	3 4.9%	20 32.8%	8 13.1%	13 21.3%	9 14.8%	61 100.0%
3	Assess the safety of a clients home environment	23 37.7%	13 21.3%	9 14.8%	4 6.6%	10 16.4%	2 3.3%	61 100.0%
4	Assist a client with personal hygiene	6 9.8%	10 16.4%	11 18.0%	5 8.2%	28 45.9%	1 1.6%	61 100.0%
5	Assess whether client is getting adequate emotional support	4 6.6%	13 21.3%	17 27.9%	6 9.8%	15 24.6%	6 9.8%	61 100.0%
6	Position or turn a client	40 65.6%	10 16.4%	10 16.4%	0	1 1.6%	0	61 100.0%
7	Develop plans for clients discharge or transfer	19 31.1%	9 14.8%	19 31.1%	5 8.2%	7 11.5%	2 3.3%	61 100.0%
8	<b>Assess patients health status</b>	<b>2</b> 3.3%	<b>2</b> 3.3%	<b>4</b> 6.6%	<b>8</b> 13.1%	<b>41</b> 67.2%	<b>4</b> 6.6%	<b>61</b> 100.0%
9	Assess family's health status	11 18.0%	8 13.1%	18 29.5%	3 4.9%	13 21.3%	8 13.1%	61 100.0%
10	Classify the health problem/s	4 6.6%	8 13.1%	3 4.9%	11 18.0%	29 47.5%	6 9.8%	61 100.0%
11	<b>Treat minor ailments independently</b>	<b>6</b> 9.8%	<b>2</b> 3.3%	<b>1</b> 1.6%	<b>4</b> 6.6%	<b>47</b> 70.5%	<b>5</b> 8.2%	<b>61</b> 100.0%
12	Refer patient to a multi disciplinary team member or other help	10 16.4%	8 13.1%	18 29.5%	9 14.8%	11 18.0%	5 8.2%	61 100.0%
13	Collaborate with team member (nursing) about a patient	0	7 11.5%	18 29.5%	12 19.7%	16 26.2%	8 13.1%	61 100.0%
14	Prescription of medication according to essential/Drug list	18 29.5%	1 1.6%	0	0	38 62.3%	4 6.6%	61 100.0%
15	Formulate a treatment plan	13 21.3%	4 6.6%	6 9.8%	2 3.3%	31 50.8%	4 6.6%	61 100.0%
16	Check with physician about contraindicated medications or treatments	19 31.1%	16 26.2%	10 16.4%	1 1.6%	11 18.0%	4 6.6%	61 100.0%
17	Formulate a Nursing care plan	12 19.7%	5 8.2%	8 13.1%	5 8.2%	8 13.1%	22 36.1%	61 100.0%
18	<b>Taking a Patients Blood Pressure</b>	<b>0</b>	<b>1</b> 1.6%	<b>6</b> 9.8%	<b>4</b> 6.6%	<b>43</b> 75.4%	<b>4</b> 6.6%	<b>61</b> 100.0%
19	<b>Weigh and measure height of a patient</b>	<b>0</b>	<b>3</b> 4.9%	<b>5</b> 8.2%	<b>5</b> 8.2%	<b>44</b> 72.1%	<b>4</b> 6.6%	<b>61</b> 100.0%
20	<b>Assess respiratory status</b>	<b>1</b> 1.6%	<b>1</b> 1.6%	<b>7</b> 11.5%	<b>11</b> 18.0%	<b>35</b> 57.4%	<b>6</b> 9.8%	<b>61</b> 100.0%
21	Administer oral medication	4 6.6%	4 6.6%	8 13.1%	15 24.6%	25 41.0%	5 8.2%	61 100.0%

	Tasks	Does not apply	Less than 1 per week	1-5 per week	6-10 per week	Over 10 per week	Missing	Total
22	Administer medication by intramuscular injection	5 8.2%	1 1.6%	9 14.8%	11 18.0%	31 50.8%	4 6.6%	61 100.0%
23	Administer intravenous therapy	14 23.0%	11 18.0%	21 34.4%	5 8.2%	7 11.5%	3 4.9%	61 100.0%
24	Suturing of perineum	30 49.2%	7 11.5%	18 29.5%	0	4 6.6%	2 3.3%	61 100.0%
25	Administer oxygen to patient	9 14.8%	19 31.1%	22 36.1%	4 6.6%	5 8.2%	2 3.3%	61 100.0%
26	Nebulise a patient	13 21.3%	23 37.7%	17 27.9%	3 4.9%	3 4.9%	2 3.3%	61 100.0%
27	Wound care and dressing	2 3.3%	9 14.8%	10 16.4%	9 14.8%	29 47.5%	2 3.3%	61 100.0%
28	Wound care and dressing	17 27.9%	8 13.1%	23 37.7%	6 9.8%	7 11.5%	0	61 100.0%
29	Rectal medication	23 37.7%	27 44.3%	6 9.8%	2 3.3%	2 3.3%	1 1.6%	61 100.0%
30	Removal of sutures/clips	6 9.8%	12 19.7%	31 50.8%	5 8.2%	7 1.5%	0	61 100.0%
31	Reading patients blood haemoglobin	3 4.9%	6 9.8%	14 23.0%	16 26.2%	21 34.4%	1 1.6%	61 100.0%
32	Reading patients glucose by finger prick	0	2 3.3%	10 16.4%	13 21.3%	33 54.1%	3 4.9%	61 100.0%
33	Taking blood samples	10 16.4%	7 11.5%	7 11.5%	15 24.6%	20 32.8%	2 3.3%	61 100.0%
34	<b>Urinalysis</b>	<b>2 3.3%</b>	<b>4 6.6%</b>	<b>5 8.2%</b>	<b>5 8.2%</b>	<b>41 67.2%</b>	<b>4 6.6%</b>	<b>61 100.0%</b>
35	Encourage clients to talk about their feelings	0	4 6.7%	17 28.3%	8 13.3%	25 41.7%	7 11.0%	61 100.0%
36	Urinary catheterisation (men)	49 80.3%	11 18.0%	0	0	1 1.6%	0	61 100.0%
37	Urinary catheterisation (women)	27 44.3%	21 34.4%	9 14.8%	0	2 3.3%	2 3.3%	61 100.0%
38	Monitoring for adverse reaction to treatment	4 6.6%	12 19.7%	9 14.8%	8 13.1%	26 42.6%	2 3.3%	61 100.0%
39	Discontinue treatment in cases of adverse reaction.	9 15.0%	35 58.3%	2 3.3%	6 10.0%	2 3.3%	7 17.0%	61 100.0%
40	Provide emergency care before referral	1 1.6%	8 13.1%	15 24.6%	12 19.7%	20 32.8%	5 8.2%	61 100.0%
41	Assess cardiovascular status	14 23.0%	8 13.1%	14 23.0%	10 16.4%	12 19.7%	3 4.9%	61 100.0%
42	<b>Administer an immunizing agent</b>	<b>1 1.6%</b>	<b>8 13.1%</b>	<b>6 9.8%</b>	<b>3 4.9%</b>	<b>41 67.2%</b>	<b>2 3.3%</b>	<b>61 100.0%</b>
43	Verify that a client or family has information needed for informed consent	12 19.7%	19 31.1%	14 23.0%	4 6.6%	8 13.1%	4 6.6%	61 100.0%
44	Plan alternative methods of communication for a client with hearing, speech or vision problem	22 36.1%	29 47.1%	7 11.5%	1 1.6%	1 1.6%	1 1.6%	61 100.0%



	Tasks	Does not apply	Less than 1 per week	1-5 per week	6-10 per week	Over 10 per week	Missing	Total
5	Recommend a change in drug therapy based upon client's behaviour	17 27.9%	25 41.0%	13 21.3%	0	5 8.2%	1 1.6%	61 100.0%
6	Introduction of nasogastric tube (newborn)	36 59.0%	20 32.8%	2 3.3%	0	2 3.3%	1 1.6%	61 100.0%
7	Introduction of nasogastric tube (child or adult)	31 50.8%	24 39.3%	2 3.3%	1 1.6%	0	3 4.9%	61 100.0%
8	Oral hydration	1 1.6%	10 16.4%	7 11.5%	17 27.9%	23 37.7%	3 4.9%	61 100.0%
9	Perform cardiopulmonary resuscitation	16 26.2%	33 54.1%	6 9.8%	0	0	6 9.8%	61 100.0%
0	Eye swabbing and introduction of drops	13 21.3%	23 37.7%	15 24.6%	3 4.9%	5 8.2%	2 3.3%	61 100.0%
1	Prepare a patient for investigations operations	42 68.9%	9 14.8%	6 9.8%	1 1.6%	0	3 4.9%	61 100.0%
2	Deliver a newborn	30 49.2%	5 8.2%	15 24.6%	3 4.9%	4 6.6%	4 6.6%	61 100.0%
3	Plan patient's health care with him/her	n5 8.2%	n11 18.0%	n14 23.0%	n7 11.5%	n19 31.1%	n5 8.2%	n61 100.0%
4	Educate patient's and family about patient's condition	n3 4.9%	n8 13.1%	n17 27.9%	n10 16.4%	n21 34.4%	n2 3.3%	n61 100.0%
5	Counsel patients and families about chronic conditions such as:							
5.1	Aids	7 11.5%	15 24.6%	15 24.6%	6 9.8%	18 29.5%	0	61 100.0%
5.2	Hypertension	1 1.6%	4 6.6%	8 13.1%	11 18.0%	37 60.7%	0	61 100.0%
5.3	Asthma	1 1.6%	5 8.2%	14 23.0%	11 18.0%	30 49.2%	0	n61 100.0%
5.4	Diabetes	1 1.6%	4 6.6%	12 19.7%	11 18.0%	33 54.1%	0	61 100.0%
5.5	Sexually transmitted Diseases	1 1.6%	1 1.6%	10 16.4%	9 14.8%	33 54.1%	0	61 100.0%
5.6	Dementia	15 24.6%	24 39.3%	10 16.4%	5 8.2%	5 8.2%	2 3.3%	61 100.0%
5.7	Depression	6 9.8%	20 32.8%	17 27.9%	7 11.5%	11 18.0%	0	61 100.0%
5.8	Schizophrenia	9 14.8%	15 24.6%	12 19.7%	14 23.0%	11 18.0%	0	61 100.0%

## Frequency of Tasks

	Tasks	Does not apply	Less than 1 per week	1-5 per week	6-10 per week	Over 10 per week	Missing	Total
55.9	Mental Retardation	6 9.8%	24 39.3%	19 31.1%	5 8.2%	6 9.8%	1 1.6%	61 100.0%
56	Check a client for complications due to immobility	23 37.7%	19 31.1%	10 16.4%	1 1.6%	5 8.2%	3 4.9%	61 100.0%
57	Assess orientation to person place and time	7 11.5%	17 27.9%	14 23.0%	8 13.1%	14 23.0%	1 1.6%	61 100.0%
58a	Counsel patients and families about acute conditions such as:							
58.1	Gastro enteritis	1 1.6%	9 14.8%	11 18.0%	12 19.7%	28 45.9%	0	61 100.0%
58.2	Measles	0	18 29.5%	14 23.0%	8 13.1%	19 31.1%	1 1.6%	61 100.0%
58.3	Tuberculosis	0	5 8.2%	11 18.0%	10 16.4%	33 54.1%	2 3.3%	61 100.0%
59	Compare the physical development of a client to normal	4 6.6%	15 24.6%	10 16.4%	9 14.8%	16 26.2%	7 11.7%	61 100.0%
60	Look for the source of a repeated infection	7 11.5%	8 13.1%	16 26.9%	9 14.8%	18 29.5%	3 4.9%	61 100.0%
61	Instruct staff on the need for client confidentiality	5 8.2%	11 18.0%	18 29.5%	7 11.5%	13 21.3%	7 11.5%	61 100.0%
62	Record observations of behaviour that indicate a client's mood	11 18.0%	21 34.0%	9 14.8%	7 11.5%	9 14.8%	4 6.6%	61 100.0%
63	Record intake and output	4 6.6%	19 31.1%	13 21.3%	7 11.5%	14 23.0%	4 6.6%	61 100.0%
64	Help a client to deal with negative attitudes related to illness	4 6.6%	19 31.1%	13 21.3%	7 11.5%	14 23.0%	4 6.6%	61 100.0%
65	Support terminally ill clients and their families	17 27.9%	21 34.4%	11 18.0%	3 4.9%	6 9.8%	3 4.9%	61 100.0%
66	Take measures to prevent respiratory complications	9 14.8%	13 21.3%	10 16.4%	10 16.4%	15 24.6%	4 6.6%	61 100.0%
67	Assess a client's adjustment to changes in the body image	15 24.6%	16 26.2%	15 24.6%	3 4.9%	7 11.5%	5 8.2%	61 100.0%
68	Plan measures to improve a client's appetite	n4 6.6%	n15 24.6%	n19 31.1%	n6 9.8%	n14 23.0%	n3 4.9%	n61 100.0%
69	Perform a vaginal-pelvic examination	21 34.4%	9 14.8%	16 26.2%	6 9.8%	7 11.5%	2 3.3%	61 100.0%



## Frequency of Tasks

	Tasks	Does not apply	Less than 1 per week	1-5 per week	6-10 per week	Over 10 per week	Missing	Total
70	Maintain asepsis for clients at risk	7 11.5%	9 14.8%	11 18.0%	6 9.8%	19 31.1%	9 14.8%	61 100.0%
71	Check the skill of new parents at infant feeding	8 13.1%	8 13.1%	14 20.0%	7 11.5%	21 34.4%	3 4.9%	61 100.0%
72a	Teaching parenting skills	5 8.2%	8 13.1%	19 31.1%	8 13.1%	19 31.1%	2 3.3%	61 100.0%
73	Analyse environmental hazards in the community school or workplace	19 31.1%	10 16.4%	16 26.2%	1 1.6%	9 14.8%	6 9.8%	61 100.0%
74	Check bowel sounds	29 47.5	12 19.7%	10 16.4%	1 1.6%	5 8.2%	4 6.6%	61 100.0%
75	Alter an intravenous infusion rate based on the client's condition	21 34.4%	14 23.0%	15 24.6%	1 1.6%	7 11.5%	3 4.9%	61 100.0%
76	Assess client's attitude towards various birth control methods	11 18.0%	6 9.8%	10 16.4%	7 11.5%	25 41.0%	2 3.3%	61 100.0%
77	Attach monitoring equipment to a client	36 59.0%	5 8.2%	3 4.9%	3 4.9%	10 16.4%	4 6.6%	61 100.0%
78	Administer local anesthesia	22 36.1%	9 14.8%	12 19.7%	11 18.0%	4 6.6%	3 4.9%	61 100.0%
79	Counsel suspected victims of abuse	11 19.0%	29 47.5%	13 21.3%	0	5 8.2%	3 4.9%	61 100.0%
80	Assess a client's nutrition and hydration status	2 3.3%	5 8.2%	10 16.4%	9 14.8%	33 54.1%	2 3.3%	61 100.0%
81	Conduct prenatal care session	17 27.9%	6 9.8%	4 6.6%	5 8.2%	27 44.3%	2 3.3%	61 100.0%
82	Counsel a client with urinary or bowel incontinence	20 32.8%	31 50.8%	3 4.9%	1 1.6%	5 8.2%	1 1.6%	61 100.0%
83	Assess maternal and fetal status during labour	31 50.8%	5 8.2%	13 21.3%	4 6.6%	7 11.5%	1 1.6%	61 100.0%
84	Start an intravenous infusion	14 23.0%	15 24.6%	16 26.2%	8 13.1%	5 8.2%	3 4.9%	61 100.0%
85	Identify differences between client's views of their conditions and the medical view	16 26.2%	18 29.5%	9 14.8%	6 9.8%	8 13.1%	4 6.6%	61 100.0%
86	Counsel a client with a drug/alcoholic problem	7 11.7%	22 36.7%	16 26.7%	5 8.3%	8 13.3%	2 3.3%	61 100.0%
87	Teach a client how to do exercises	4 6.6%	12 19.7%	24 39.3%	10 16.4%	7 11.5%	4 6.6%	61 100.0%

## Frequency of Tasks

	Tasks	Does not apply	Less than 1 per week	1-5 per week	6-10 per week	Over 10 per week	Missing	Total
88	Check the accuracy of orders and client data	10 16.4%	7 11.5%	12 19.7%	7 11.5%	16 26.2%	9 14.8%	61 100.0%
89	Label and prepare specimens for transmission to the laboratory	3 4.9%	7 11.5%	7 11.5%	15 24.6%	26 42.6%	3 4.9%	61 100.0%
90	Take measures to counteract the effects of poisons or the side effects of medications	14 23.0%	20 32.8%	14 23.0%	2 3.3%	7 11.5%	4 6.6%	61 100.0%
91	Obtain specimens from clients for laboratory tests	5 8.2%	5 8.2%	13 21.3%	11 18.0%	25 41.0%	2 3.3%	61 100.0%
92	Participate in a multi disciplinary team conference in planning	31 50.8%	17 27.9%	6 9.8%	0	2 3.3%	5 8.2%	61 100.0%
93	Assess a newborn	15 24.6%	12 19.7%	18 29.5%	7 11.5%	7 11.5%	2 3.3%	61 100.0%
94	Help a client to do activities of daily living	7 11.5%	17 27.9%	15 24.6%	5 8.2%	10 16.4%	7 11.5%	61 100.0%
95	Use reference material to check on expected effects of therapy	22 36.1%	9 14.8%	10 16.4%	1 1.6%	11 18.0%	8 13.1%	61 100.0%
96	Assess clients' ability to meet their nutritional needs	0	10 16.4%	16 26.2%	9 14.8%	23 37.7%	3 4.9%	61 100.0%
97	Issue drugs from the drug storeroom to consulting rooms	20 32.8%	n3 4.9%	7 11.5%	6 9.8%	19 31.1%	6 9.8%	61 100.0%
98a	Carry out drug stock management in the drug store (tidy stock, check balances against cards and check expiry dates)	n17 27.9%	n6 9.8%	n15 24.6%	n3 4.9%	n15 24.6%	n5 8.2%	n61 100.0%
99	Distribute educational pamphlets	1 1.6%	10 16.4%	14 23.0%	10 16.4%	21 34.4%	5 8.2%	61 100.0%
100	Do passive range of motion exercise for a client	26 42.6%	13 21.3%	5 8.2%	3 4.9%	7 11.5%	7 11.5%	61 100.0%
101	Schedule/assist in planning staff duty roster	18 29.5%	7 11.5%	20 32.8%	0	7 11.5%	9 14.8%	61 100.0%
102	Ordering of medicine	15 24.6%	18 29.5%	15 24.6%	2 3.3%	7 11.5%	4 6.6%	61 100.0%
103	Requisitioning of equipment and supplies	10 16.4%	28 45.9%	7 11.5%	1 1.6%	7 11.5%	8 13.1%	61 100.0%
104	Record keeping	6 9.8%	2 3.3%	3 4.9%	5 8.2%	33 54.1%	12 19.7%	61 100.0%



## Frequency of Tasks

	Tasks	Does not apply	Less than 1 per week	1-5 per week	6-10 per week	Over 10 per week	Missing	Total
105	Supervisory subordinates	10 16.4%	10 16.4%	12 19.7%	1 1.6%	21 34.4%	7 11.5%	61 100.0%
106	Orientate new staff	11 18.0%	23 37.7%	5 8.2%	1 1.6%	8 13.1%	13 21.3%	61 100.0%
107	Plan work allocation	14 23.0%	14 23.0%	14 23.0%	2 3.3%	6 9.8%	7 11.5%	61 100.0%
108	Attend community meetings	14 23.0%	29 47.5%	4 6.6%	0	6 9.8%	8 13.1%	61 100.0%
109	Attend multidisciplinary discussions	28 45.9%	18 27.5%	4 6.6%	0	4 6.6%	7 11.5	61 100.0%
110	Identify staff training needs	22 36.1	16 26.2%	10 16.4%	2 3.3%	3 47.9%	8 13.1%	61 100.0%
111	Conduct staff in-service training	20 32.8%	20 32.8%	11 18.0%	0	4 6.6%	6 9.8%	61 100.0%
112	Attend in-service training	3 4.9%	34 55.7%	9 14.8%	2 3.3%	6 9.8%	7 11.5%	61 100.0%
113	Handing over care of a patient/s to other nurses	6 9.8%	12 19.7%	10 16.4%	7 11.5%	17 27.9%	9 14.8%	61 100.0%
114	Do antenatal teaching	9 14.8%	3 4.9%	14 23.0%	9 14.8%	23 37.7&	3 4.9%	61 100.0%
115	Evaluate staff member's understanding of procedures and policies	21 34.4%	19 31.1%	9 14.8%	1 1.6%	7 11.5%	4 6.6%	61 100.0%
116	Minimize pain or discomfort of patient	1 1.6%	5 8.2%	14 23.0%	8 13.1%	26 42.6%	7 11.5%	61 100.0%
117	Arrange the environment to promote client safety	3 4.9%	7 11.5%	14 23.0%	7 11.5%	21 34.4%	9 14.8%	61 100.0%
118	Give emotional/support to staff	3 4.9%	18 29.5%	14 23.0%	5 8.2%	16 26.2%	5 8.2%	61 100.0%
119	Check for functioning of all equipment	4 6.6%	7 11.5%	13 21.3%	11 18.0%	18 29.5%	8 13.1%	61 100.0%
120	Document treatment errors or accidents	19 31.1%	13 21.3%	13 21.3%	2 3.3%	5 8.2%	9 14.8	61 100.0%
121	Assist in planning a disaster programme	16 26.2%	25 41.0%	7 11.5%	2 3.3%	6 9.8%	5 8.2%	61 100.0%
122	Record or report changes in client's condition	6 9.8%	9 14.8%	18 29.5%	11 18.0%	11 18.0	6 9.8%	61 100.0%
123	Assess suicide risk	15 24.6%	31 50.8%	5 8.2%	2 3.3%	3 4.9%	5 8.2%	61 100.0%

## Frequency of Tasks

	Tasks	Does not apply	Less than 1 per week	1-5 per week	6-10 per week	Over 10 per week	Missing	Total
24	Assess potential risk of patient as a danger to self and others	7 11.5%	27 44.3%	7 11.5%	4 6.6%	7 11.5%	9 14.8%	61 100.0%
25	Participate in running community project	17 27.9%	24 39.3%	5 8.2%	2 3.3%	4 6.6%	9 14.8%	61 100.0%
26	Educate client with regard to health programme/ill programme	2 3.3%	12 19.7%	17 27.9%	4 6.6%	22 36.1%	4 6.6%	61 100.0%
27	Assess client understanding for health and normal growth	0	6 9.8%	16 26.2%	10 16.4%	25 41.0%	4 6.6%	61 100.0%
28	Develop teaching material	11 18.0%	17 27.9%	11 18.0	4 6.6%	10 16.4%	8 13.1%	61 100.0%
29	Arrange for spiritual support during life transitions or crises	11 18.0%	15 24.6^	13 21.3%	7 11.5%	5 8.2%	10 16.4\$	61 100.0%
130	Help a client to eat	31 50.8%	11 18.0%	6 9.8%	6 9.8%	4 6.6%	3 4.9%	61 100.0%
131	Check a client for signs and symptoms of alcohol/drug withdrawal	13 21.3%	23 37.7%	12 19.7%	0	7 11.5%	6 9.8%	61 100.0%
132	Conduct a group session for client with psychiatric disorders	31 50.8%	16 26.2%	5 8.2%	2 3.3%	4 6.6%	3 4.9%	61 100.0%
133	Engage a client in individual counselling	5 8.2%	12 19.7%	19 31.1%	3 4.9%	18 29.5%	4 6.6%	61 100.0%
134	Assess the need for administration of prn medication	12 19.7%	6 9.8%	11 18.0%	6 9.8%	22 36.1%	4 6.6%	61 100.0%
135	Evaluate a client's use of home remedies and over-the-counter drugs	7 11.5%	6 9.8%	19 31.1%	8 13.1	12 19.7%	9 14.8%	61 100.0%
136	Suction a client's respiratory tract	16 26.2%	27 44.3%	9 14.8%	3 4.9%	4 6.6%	2 3.3%	61 100.0%
137	Order routine laboratory tests	17 27.9%	6 9.8%	10 16.4%	6 9.8%	16 26.2%	6 9.8%	61 100.0%
138	Ask a physician if medication can be modified to meet a client's special needs	13 21.3%	15 24.6%	23 37.7%	2 3.3%	2 3.3%	6 9.8%	61 100.0%
139	Intervene in situations involving unsafe or inadequate care	9 14.8%	20 32.8%	9 14.8%	-1 1.6%	14 23.0%	8 13.9%	61 100.0%
140	Refer to research literature in planning care	26 42.6%	13 21.3%	5 8.2%	3 4.9%	7 11.5%	7 11.5%	61 100.0%
141	Evaluate client's compliance with prescribed therapy	11 18.0%	2 3.3%	5 8.2%	11 18.0%	23 37.7%	9 14.8%	61 100.0%



## Annexure C

### Importance of task performed

Importance of tasks

Key Important: Bold numbers

	Tasks	Does not apply	Can sometimes omit	Can never omit	Missing	Total
1	History taking	3 4.9%	3 4.9%	30 49.2%	25 41.0%	61 100.0%
2	Modify food and fluid intake to promote fluid and electrolyte	8 13.1%	11 18.0%	15 24.6%	27 44.3%	61 100.0%
3	Assess the safety of a clients home environment	23 37.7%	15 24.6%	9 14.8%	14 23.0%	61 100.0%
4	Assist a client with personal hygiene	6 9.8%	13 1.3%	20 32.8%	22 36.1%	61 100.0%
5	Assess whether client is getting adequate emotional support position or turn a client	4 6.6%	15 24.6%	17 27.9%	25 40.9%	61 100.0%
6	Position or turn a client	40 65.6%	n8 13.1%	7 11.5%	6 9.8%	61 100.0%
7	Develop plans for clients discharge or transfer	19 31.1%	8 13.1%	19 31.1%	15 24.6%	61 100.0%
8	Assess patients health status	2 3.3%	2 3.3%	39 63.9%	18 29.1%	61 100.0%
9	Assess family's health status	11 18.0%	14 23.0%	19 31.1%	17 27.9	61 100.0%
10	Classify the health problem is	4 6.6%	3 4.9%	34 55.7%	20 32.7%	61 100.0%
11	Treat minor ailments independently	6 9.8%	3 4.9%	34 55.7%	18 29.5%	61 100.0%
12	Refer patient to a multi disciplinary team member or other help	10 16.4%	10 16.4%	26 42.6%	15 24.6%	61 100.0%
13	Collaborate with team member (nursing) about a patient	0	10 16.4%	28 45.9%	23 37.7%	61 100.0%
14	Prescription of medication according to essential Drug List	18 29.5%	3 4.9%	32 52.5%	n8 13.1%	61 100.0%
15	Formulate a treatment plan	13 21.3%	4 6.6%	30 49.2%	14 23.0%	61 100.0%
16	Check with physician about contraindicated medications or treatments	19 31.1%	13 21.3%	16 26.2%	13 21.3%	61 100.0%
17	Formulate a nursing care plan	12 19.7%	10 16.4%	23 37.7%	16 26.2%	61 100.0%
18	Taking a patients blood pressure	0	10 16.4%	34 55.7%	17 27.9%	61 100.0%
19	Weigh and measure height of a patient	0	16 26.2%	21 34.4%	24 39.3%	61 100.0%

	Tasks	Does not apply	Can sometimes omit	Can never omit	Missing	Total
20	Assess respiratory status	1 1.6%	10 16.4%	34 55.7%	16 26.2%	61 100.0%
21	Administer oral medication	4 6.6%	13 21.3%	n25 41.0%	n19 31.1%	n61 100.0%
22	Administer medication by intramuscular injection	5 8.2%	10 23.3%	28 65.1%	0	61 100.0%
23	Administer intravenous therapy	14 23.0%	16 26.2%	14 23.0%	17 27.9%	61 100.0%
24	Suturing of perineum	30 49.2%	4 6.6%	18 29.5%	9 14.8%	61 100.0%
25	Administer oxygen to patient	10 16.4%	8 13.1%	26 42.6%	17 27.9%	61 100.0%
26	Nebulise a patient	13 21.3%	9 14.8%	24 39.3%	15 24.6%	61 100.0%
27	Wound care and dressing	2 3.3%	9 14.8%	29 47.5%	21 34.4%	61 100.0%
28	Wound closure by suture	17 27.9%	12 19.7%	15 24.6%	17 27.9%	61 100.0%
29	Rectal medication	23 37.7%	16 26.2%	10 16.4%	12 19.7%	61 100.0%
30	Removal of sutures/clips	6 9.8%	5 8.2%	29 47.5%	21 34.4%	61 100.0%
31	Reading patients blood haemoglobin	3 4.9%	13 21.3%	24 39.3%	21 34.4%	61 100.0%
32	Reading patients glucose by finger pick	0	11 18.0%	28 45.9%	22 36.1%	61 100.0%
33	Taking blood samples	10 16.4%	11 18.0%	21 34.4%	19 31.1%	61 100.0%
34	Urinalysis	2 3.3%	10 16.4%	30 49.2%	19 31.1%	61 100.0%
35	Encourage clients to talk about their feelings	0	n14 23.0%	n29 47.5%	n18 29.5%	n61 100.0%
36	Urinary catheterisation (men)	n50 82.0%	n5 8.2%	n1 1.6%	n5 8.2%	n61 100.0%
37	Urinary catheterisation (women)	26 42.6%	12 19.7%	13 21.3%	10 16.4%	61 100.0%
38	Monitoring for adverse reaction to treatment	4 6.6%	6 9.8%	31 50.8%	20 32.8%	61 100.0%
39	Discontinue treatment in cases if adverse reaction	9 15.0%	2 3.3%	30 49.2%	20 32.8%	61 100.0%
40	Provide emergency care before referral	1 1.6%	4 6.6%	32 52.5%	24 39.3%	61 100.0%
41	Assess cardiovascular status	14 23.0%	10 16.4%	19 31.1%	18 29.5%	61 100.0%
42	Administer an immunizing agent	1 1.6%	9 14.8%	26 42.6%	25 41.0%	61 100.0%
43	Verify that a client or family has information needed for informed consent	12 19.7%	9 14.8%	22 36.1%	18 29.5%	61 100.0%



## Importance of Tasks

	Tasks	Does not apply	Can sometimes omit	Can never omit	Missing	Total
44	Plan alternative methods of communication for a client with hearing, speech or vision problem consent	22 36.1%	9 14.8%	17 27.9%	13 21.3%	61 100.0%
45	Recommend a change in drug therapy based upon client's behaviour	17 27.9%	6 9.8%	22 36.1%	16 26.2%	61 100.0%
46	Introduction of nasogastric tube (New born)	36 59.0%	7 11.5%	11 18.0%	7 11.5%	61 100.0%
47	Introduction of nasogastric tube (child or adult)	31 50.8%	7 11.5%	14 23.0%	9 14.8%	61 100.0%
48	Oral hydration	0	7 11.5%	33 54.1%	21 34.4%	61 100.0%
49	Perform cardiopulmonary resuscitation	18 29.5%	3 4.9%	25 41.0%	15 24.6%	61 100.0%
50	Eye swabbing and introduction drops	12 19.7%	9 14.8%	19 31.1%	21 34.4%	61 100.0%
51	Prepare a patient for investigations	42 68.9%	4 6.6%	4 6.6%	11 18.0%	61 100.0%
52	Delivery a new born	30 49.2%	0	20 32.8%	11 18.0%	61 100.0%
53	Plan patient's health care with him/her	5 8.2%	7 11.5%	27 44.3%	22 36.1%	61 100.0%
54	Educate patients and family about patient's condition.	4 6.6%	5 8.2%	30 49.2%	22 36.1%	61 100.0%
55	Counsel patients and families about chronic conditions such as:					
55.1	Aids	7 11.5%	6 9.8%	23 37.7%	25 41.0%	61 100.0%
55.2	Hypertension	1 1.6%	7 11.5%	31 50.8%	22 36.1%	61 100.0%
55.3	Asthma	1 1.6%	8 13.1%	30 49.2%	22 36.1%	61 100.0%
55.4	Diabetes	1 1.6%	7 11.5%	31 50.8%	22 36.1%	61 100.0%
55.5	Sexually transmitted diseases	1 1.6%	3 4.9%	34 55.7%	23 37.7%	61 100.0%
55.6	Dementia	15 24.6%	11 18.0%	14 23.0%	21 34.4%	61 100.0%
55.7	Depression	6 9.8%	8 13.1%	25 41.0%	22 36.1	61 100.0%
55.8	Schizophrenia	9 14.8%	9 14.8%	22 36.1%	21 34.4%	61 100.0%
55.9	Mental Retardation	6 9.8%	7 11.5%	26 42.6%	22 36.1	61 100.0%
56	Check a client for complications due to immobility	23 37.7%	8 13.1%	15 24.6%	15 24.6%	61 100.0%
57	Assess orientation to person, place and time	7 11.5%	11 18.0%	24 39.3%	19 31.1%	61 100.0%
58	Counsel patients and families about acute conditions such as:					
58.1	Gastro-enteritis	1 1.6%	6 9.8%	32 52.5%	22 36.1%	61 100.0%

## Importance of Tasks

	Tasks	Does not apply	Can sometimes omit	Can never omit	Missing	Total
58.2	Measles	0	9 14.8%	28 55.9%	24 39.3%	61 100.0%
58.3	Tuberculosis	0	8 13.1%	31 50.8%	22 36.1%	61 100.0%
59	Compare the physical development of a client to normal	4 6.6%	13 21.3%	20 32.8%	24 39.3%	61 100.0%
60	Look for the source of a repeated infection	7 11.5%	3 4.9%	29 47.5%	22 36.1%	61 100.0%
61	Instruct staff on the need for client confidentiality	4 6.6%	6 9.8%	30 49.2%	21 34.4%	61 100.0%
62	Record observations of behaviour that indicate a client's mood	11 18.0%	12 19.7%	19 31.1%	19 31.1%	61 100.0%
63	Record intake and output	30 49.2%	6 9.8%	12 19.7%	13 21.3%	61 100.0%
64	Help a client to deal with negative attitudes related to illness	5 8.2%	8 13.1%	27 44.3%	21 34.4%	61 100.0%
65	Support terminally ill clients and their families	17 27.9%	9 14.8%	19 31.1%	16 26.2%	n61 100.0%
66	Take measures to prevent respiratory complications	9 14.8%	2 3.3%	28 45.9%	22 36.1%	61 100.0%
67	Assess a client's adjustment to changes in the body image	15 24.6%	10 16.4%	16 26.2%	20 32.8%	61 100.0%
68	Plan measures to improve a client's appetite	4 6.6%	13 21.3%	23 37.7%	21 34.4%	61 100.0%
69	Perform a vaginal-pelvic examination	21 34.4%	9 14.8%	17 27.9%	14 23.0%	61 100.0%
70	Maintain asepsis for clients at risk	6 9.8%	3 4.9%	36 59.0%	16 26.2%	61 100.0%
71	Check the skill of new parents at infant feeding	8 13.8%	5 8.2%	28 45.9%	20 32.8%	61 100.0%
72	Teaching parenting skills	7 11.5%	10 16.4%	24 39.3%	20 32.8%	61 100.0%
73	Analyse environmental hazards in the community, school or workplace	19 31.1%	7 11.5%	19 31.1%	16 26.2%	61 100.0%
74	Check bowel sounds	28 45.9%	8 13.1%	12 19.7%	13 21.3%	61 100.0%
75b	Alter an intravenous infusion rate based on the client's condition	22 36.1%	3 4.9%	22 36.1%	14 23.0%	61 100.0%
76	Assess client's attitude toward various birth control methods	11 18.0%	8 13.1%	25 41.0%	17 27.9%	61 100.0%
77	Attach monitoring equipment to a client	36 59.0%	4 6.6%	12 19.7%	9 14.8%	61 100.0%
78	Administer local anesthesia	22 6.1%	3 4.9%	21 34.4%	15 24.6%	61 100.0%
79	Counsel suspected victims of abuse	11 18.0%	3 4.9%	28 45.9%	19 31.1%	61 100.0%
80	Assess a client's nutrition and hydration status	2 3.3%	7 11.5%	31 50.8%	22 34.4%	61 100.0%



## Importance of Tasks

	Tasks	Does not apply	Can sometimes omit	Can never omit	Missing	Total
81	Conduct prenatal care session	17 27.9%	8 13.1%	19 31.1%	17 27.9%	61 100.0%
82	Counsel a client with urinary or bowel incontinence	20 32.8%	7 11.5%	20 32.8%	14 23.0%	61 100.0%
83	Assess maternal and fetal status during labour	31 50.8%	1 1.6%	20 32.8%	9 14.8%	61 100.0%
84	Start an intravenous infusion	14 23.0%	9 14.8%	21 34.4%	17 27.9%	61 100.0%
85	Identify differences between client's views of their conditions and the medical view	16 26.2%	13 21.3%	14 23.0%	18 29.5%	61 100.0%
86	Counsel a client with drug/alcohol problem	7 11.5%	10 16.4%	23 37.7%	21 34.4%	61 100.0%
87	Teach a client how to do exercises	5 8.2%	14 23.0%	20 32.8%	22 36.1%	61 100.0%
88	Check the accuracy of orders and client data	10 16.4%	2 3.3%	22 36.1%	27 44.3%	61 100.0%
89	Label and prepare specimens for transmission the laboratory	3 4.9%	4 6.6%	33 54.1%	21 34.4%	61 100.0%
90	Take measures to counteract the effects of poisons or the side effects of medications	14 23.0%	2 3.3%	29 47.5%	16 26.2%	61 100.0%
91	Obtain specimens from clients for laboratory tests	5 8.2%	6 9.8%	29 47.5%	21 34.4%	61 100.0%
92	Participate in a multi disciplinary team conference in planning	31 50.8%	12 19.7%	4 6.6%	14 23.0%	61 100.0%
93	Assess a newborn	15 24.6%	2 3.3%	28 45.9%	16 26.2%	61 100.0%
94	Help a client to do activities of daily living	7 11.5%	16 26.2%	16 26.2%	22 36.1%	61 100.0%
95	Use reference material to check on expected effects of therapy	22 36.1%	8 13.1%	17 27.9%	14 23.0%	61 100.0%
96	Assess client's ability to meet their nutritional needs	0	12 19.7%	26 42.6%	23 37.7%	61 100.0%
97	Issue drugs from the drug storeroom to consulting rooms	20 32.8%	5 8.2%	24 39.3%	12 19.7%	61 100.0%
98	Carry out drug stock management in the drug store (tidy stock, check balances against cards and check expiry dates)	17 27.9%	4 6.6%	26 42.6%	14 22.9%	61 100.0%
99	Distribute educational pamphlets	1 1.6%	22 36.1%	18 29.5%	20 32.8%	61 100.0%
100	Do passive range of motion exercises for a client	26 42.6%	10 16.4%	15 24.6%	10 16.4%	61 100.0%
101	Schedule/assist in planning staff duty roster	18 29.5%	9 14.8%	19 31.1%	15 24.6%	61 100.0%
102	Ordering of medicine	15 24.6%	4 6.6%	24 39.3%	18 29.5%	61 100.0%

## Importance of Tasks

	Tasks	Does not apply	Can sometimes omit	Can never omit	Missing	Total
103	Requisitioning of equipment and supplies	10 16.4%	9 14.8%	25 41.0%	17 27.9%	61 100.0%
104	Record keeping	6 9.8%	1 1.6%	39 63.9%	15 24.6%	61 100.0%
105	Supervise subordinates	10 16.4%	8 13.1%	28 45.9%	15 24.6%	61 100.0%
106	Orientate new staff	11 18.0%	3 4.9%	33 54.1%	14 23.0%	61 100.0%
107	Plan work allocation	15 24.6%	8 13.1%	21 34.4%	17 27.9%	61 100.0%
108	Attend community meetings	14 23.0%	20 32.8%	12 19.7%	15 24.6%	61 100.0%
109	Attend multi disciplinary discussions	28 45.9%	11 18.0%	4 6.6%	18 29.5%	61 100.0%
110	Identify staff training needs	22 36.1%	6 9.8%	16 26.2%	17 27.9%	61 100.0%
111	Conduct staff in-service training	20 32.8%	15 24.6%	10 16.4%	16 26.2%	61 100.0%
112	Attend in service training	3 4.9%	20 32.8%	19 31.1%	19 31.1%	61 100.0%
113	Handing over care of a patient's to other nurses	5 8.2%	5 8.2%	34 55.7%	17 27.9%	61 100.0%
114	Do antenatal teaching	9 14.8%	7 11.5%	26 42.6%	19 31.1%	61 100.0%
115	Evaluate staff member's understanding of procedures and policies	21 34.4%	16 26.2%	10 16.4%	14 23.0%	61 100.0%
116	Minimize pain or discomfort of patient	1 1.6%	6 9.8%	36 59.0%	18 29.5%	61 100.0%
117	Arrange the environment to promote client safety	3 4.9%	6 9.8%	35 57.4%	17 27.9%	61 100.0%
118	Give emotional support to staff	3 4.9%	10 16.4%	30 49.2%	18 29.5%	61 100.0%
119	Check for functioning of all equipment	4 6.6%	7 11.5%	34 55.7%	16 26.2%	61 100.0%
120	Document treatment error or accidents	19 31.1%	5 8.2%	17 27.9%	20 32.8%	61 100.0%
121	Assist in planning a disaster programme	16 26.2%	7 11.5%	19 31.1%	19 31.1%	61 100.0%
122	Record/report changes in client's condition	6 9.8%	7 11.5%	28 25.9%	20 32.8%	61 100.0%
123	Assess suicide risk	15 24.6%	3 4.9%	24 39.3%	19 31.1%	61 100.0%
124	Assess potential risk of patient as a danger to self and other	7 11.5%	4 6.6%	31 50.8%	19 31.1%	61 100.0%
125	Participate in running community project	17 27.9%	13 21.3%	7 11.5%	24 39.3%	61 100.0%
126	Educate client with regard to health programme/ill programme	2 3.3%	10 16.4%	27 44.3%	22 36.1%	61 100.0%



### Importance of Tasks

	Tasks	Does not apply	Can sometimes omit	Can never omit	Missing	Total
127	Assess client understanding for health and normal growth	0	10 16.4%	29 47.5%	22 36.1%	61 100.0%
128	Develop teaching material	11 18.0%	14 23.0%	12 19.7%	24 39.3%	61 100.0%
129	Arrange for spiritual/support during life transitions or crises	11 18.0%	8 13.1%	23 37.7%	19 31.1%	61 100.0%
130	Help a client to eat	31 50.8%	4 6.6%	11 18.0%	15 24.6%	61 100.0%
131	Check a client for signs and symptoms of alcohol/drug	13 21.3%	9 14.8%	18 29.5%	21 34.4%	61 100.0%
132	Conduct a group session for client	31 50.8%	7 11.5%	7 11.5%	16 26.2%	61 100.0%
133	Engage a client individual counseling	5 8.2%	9 14.8%	29 47.5%	18 29.5%	61 100.0%
134	Assess the need for administration of prn medication	12 19.7%	10 16.4%	18 29.5%	21 34.4%	61 100.0%
135	Evaluate a client's use of home remedies and over the counter drugs	7 11.5%	10 16.4%	27 44.3%	17 27.9%	61 100.0%
136	Suction a client's respiratory tract	16 26.2%	5 8.2%	23 37.7%	17 27.9%	61 100.0%
137	Order routine laboratory tests	17 27.9%	4 6.6%	17 27.9%	23 37.7%	61 100.0%
138	Ask a physician if medication can be modified to meet a client's special needs	13 21.3%	3 4.9%	26 42.6%	19 31.1%	61 100.0%
139	Intervene in situations involving unsafe or inadequate	9 14.8%	6 9.8%	25 41.0%	21 34.4%	61 100.0%
140	Refer to research literature in planning care	26 42.6%	10 16.4%	15 24.6%	10 16.4%	61 100.0%
141	Evaluate client's compliance with prescribed therapy	11 18.0%	2 3.3%	32 52.5%	16 26.2%	61 100.0%

## ANNEXURE D: Frequency-Importance Index

	Mean Frequency	Mean Importance	Frequency-Importance Index
1	4.39	1.75	7.68
2	2.28	1.2	2.74
3	1.4	0.7	0.98
4	2.65	1.35	3.58
5	2.27	1.4	3.18
6	0.55	0.4	0.22
7	1.52	1	1.52
8	3.47	1.9	6.59
9	1.98	1.18	2.34
10	2.96	2.19	6.48
11	3.35	1.65	5.53
12	2.05	1.34	2.75
13	2.69	1.73	4.65
14	2.68	1.26	3.38
15	2.8	2.27	6.36
16	1.45	0.93	1.35
17	2.47	1.24	3.06
18	2.66	1.77	4.71
19	3.57	4.09	14.60
20	3.87	3.37	13.04
21	2.94	1.5	4.41
22	3.08	1.53	4.71
23	1.65	1	1.65
24	1	0.76	0.76
25	1.61	1.36	2.19
26	1.87	1.28	2.39
27	2.91	1.67	4.86
28	1.63	0.95	1.55
29	0.88	0.73	0.64
30	1.91	1.58	3.02
31	2.77	1.52	4.21
32	3.33	1.72	5.73
33	2.47	1.26	3.11
34	3.39	1.67	5.66
35	3	1.67	5.01
36	0.59	0.21	0.12
37	1.21	0.82	0.99
38	2.71	1.61	4.36
39	1.48	1.47	2.18
40	2.62	1.74	4.56
41	2.05	1.2	2.46
42	3.02	1.25	3.78
43	2.37	1.32	3.13
44	1.14	0.98	1.12
45	1.27	1	1.27
46	0.76	0.59	0.45
47	0.96	0.8	0.77
48	2.87	4.1	11.77
49	1.1	1.19	1.31
50	1.72	1.35	2.32
51	1.2	0.6	0.72
52	0.98	0.6	0.59
53	2.27	1.46	3.31

54	2.78	3.03	8.42
55.1	2.14	1.49	3.19
55.2	3.1	1.67	5.18
55.3	2.86	1.65	4.72
55.4	3.02	1.75	5.29
55.5	3.13	1.68	5.26
55.6	1.44	0.92	1.32
55.7	1.96	1.3	2.55
55.8	1.82	1.04	1.89
55.9	1.65	1.35	2.23
56	1.46	0.94	1.37
57	2.23	1.41	3.14
58.1	2.89	3.05	8.81
58.2	1.41	3.03	4.27
58.3	3.03	1.64	4.97
59	1.26	2.24	2.82
60	2.24	1.38	3.09
61	2.24	1.57	3.52
62	1.8	1.14	2.05
63	1.86	0.95	1.77
64	2.28	1.54	3.51
65	1.76	1.2	2.11
66	2.4	1.52	3.65
67	2.16	1	2.16
68	2.83	1.49	4.22
69	1.31	0.75	0.98
70	1.28	1.61	2.06
71	2.43	1.26	3.06
72	2.21	1.22	2.70
73	1.51	0.92	1.39
74	1.08	0.64	0.69
75	1.63	1.04	1.70
76	2.22	1.15	2.55
77	1.58	0.74	1.17
78	1.34	0.81	1.09
79	1.29	1.24	1.60
80	3.15	1.73	5.45
81	2	0.84	1.68
82	1.22	0.95	1.16
83	1.06	0.64	0.68
84	1.79	1.08	1.93
85	1.76	0	0.00
86	1.83	0.81	1.48
87	2.28	1.4	3.19
88	2.49	1.43	3.56
89	3.16	1.77	5.59
90	1.76	1.34	2.36
91	2.99	1.62	4.84
92	0.8	0.47	0.38
93	1.66	1.09	1.81
94	2.16	1.28	2.76
95	1.51	0.9	1.36
96	2.74	1.53	4.19
97	1.63	0.81	1.32
98	1.65	1.07	1.77



99	2.34	1.23	2.88
100	1.53	0.98	1.50
101	1.52	1.09	1.66
102	1.65	1.39	2.29
103	3.08	1.66	5.11
104	2.4	1.34	3.22
105	1.76	1.41	2.48
106	1.57	1.07	1.68
107	1.23	0.88	1.08
108	0.85	0.53	0.45
109	1.1	0.82	0.90
110	1.09	0.77	0.84
111	1.57	1.33	2.09
112	2.59	1.59	4.12
113	2.15	2.32	4.99
114	1.36	0.86	1.17
115	3.15	1.79	5.64
116	2.89	1.73	5.00
117	2.37	1.63	3.86
118	2.76	1.65	4.55
119	1.32	0.91	1.20
120	2.05	0.98	2.01
121	2.58	1.61	4.15
122	1.28	1.16	1.48
123	1.82	1.48	2.69
124	1.02	0.68	0.69
125	2.45	1.46	3.58
126	2.78	1.51	4.20
127	1.57	2.14	3.36
128	2.89	1.22	3.53
129	1.69	0.81	1.37
130	1.71	1.12	1.92
131	0.8	0.44	0.35
132	1.97	1.39	2.74
133	2.5	1.28	3.20
134	2.09	1.3	2.72
135	1.59	1.26	2.00
136	1.71	0.88	1.50
137	1.61	1.22	1.96
138	1.93	1.43	2.76
139	1.1	0.68	0.75
140	2.49	1.36	3.39
141	2.12	1.71	3.63
mean			3.02
Standard dev			2.26