

**All MHC's and CNA's who wish to staff shifts must
(Sitters/1:1's don't complete)**

Complete all Tests in this Section

**Agency Supervisor should score exams, and write score on top
of each test.**

**If employee does not pass at 80%, remediate with employee
and indicate on exam that this was done.**

Return all Tests to Fort Logan

You may fax all documents to 303-866-7073 or

Scan them to either nancy.lynch@state.co.us

~~Kathy.krupa@state.co.us~~

jody.rindt@state.co.us

Student/Agency HIPAA test

1. HIPAA stands for Health Insurance and Portability Act.

True False

2. The privacy Provisions of HIPAA went into effect on April 15, 2003

True False

3. An individual who has access to any part of a patient's PHI can look at everything in the patient's chart.

True False

4. Patients have the right to review their PHI if they follow the standard CMHIFL procedure to do so.

True False

5. Sanctions, including monetary fines, can be assessed against hospital and individuals if the HIPAA Privacy Regulations are violated.

True False

6. It is all right to dispose of PHI in any wastebasket throughout the hospital.

True False

Name _____

Date _____

Colorado Department of Human Services

**HIPAA Security
Awareness and Training**

Confidentiality Statement

As a member of the workforce of the Colorado Department of Human Services (CDHS), I may be given access to patient Protected Health Information, whether in verbal, written or electronic format.

I will maintain in strictest confidence the Protected Health Information to which I have access. I will not share any confidential information with others who are not authorized, including other staff members, friends or family. I will use my access to Protected Health Information for the sole purpose of conducting legitimate business of the CDHS.

My access to patient Protected Health Information is often facilitated by electronic information systems. In the interest of maintaining the integrity of these systems and of ensuring the privacy, security and proper use of the CDHS resources, I will not share my password to any such systems to which I have access.

I have attended HIPAA Security Awareness and Training. I have received instruction and training on the HIPAA Security policies, including where and how to access them both electronically and by paper.

I understand that the use of Protected Health Information, other than for legitimate business purposes, is strictly prohibited. I understand that failure to follow proper policies and procedures concerning access to Protected Health Information may result in sanctions and disciplinary action, up to and including termination of employment at the CDHS.

Print Employee Name: _____

Signature: _____

Division/Department: _____

Date: _____

Colorado Department of Human Services



Evaluation and Certification

**HIPAA Security Awareness
and Training**

Instructions

If you get at least seven out of ten questions right, you pass. If you do not pass, you must attend the training course again.

Mandatory: You must sign the Confidentiality Statement and return it to the Privacy and Security Officer.

The course evaluation is optional, but your feedback is greatly appreciated.

Test Questions

Circle the most correct answer.

1. The HIPAA Final Rule uses the following key terms when talking about the security of protected health information:
 - a. confidentiality, availability, and redundancy
 - b. confidentiality, integrity, and availability
 - c. confidentiality, integrity, and inaccessibility
 - d. integrity, reliability, and availability
2. Why would hackers want to access a patient's PHI?
 - a. to steal financial information
 - b. to steal an individual's identity
 - c. to see if they can gain access
 - d. all of the above
3. What is the effective date for HIPAA security compliance?
 - a. October 16, 2004
 - b. February 16, 2005.
 - c. April 20, 2005
 - d. April 20, 2006
4. All CDHS policies and procedures relating to security are located on the Intranet.
 - a. true
 - b. false
5. If implementing a standard is too expensive, the covered entity may ignore the standard.
 - a. true
 - b. false
6. CDHS audits both systems and individual users for compliance with established policies and procedures.
 - a. true
 - b. false
7. You only need to wear your ID badge until the security guard and coworkers get to know you.
 - a. true
 - B. false
8. Elements of a strong password include:
 - a. fewer than 6 characters so you won't have to type too much
 - b. names of pets or relatives that you can easily remember
 - c. words that you can find in the dictionary
 - d. a combination of upper and lower case letters, symbols, and numerals
9. Which of the following activities are not allowed under the CDHS acceptable use policy?
 - a. looking up pornographic web sites
 - b. downloading free game software
 - c. e-mailing protected health information to a client's lawyer
 - d. sharing your password with your coworkers
 - e. all of the above
10. The Security Rule requires that sanctions be applied equally regardless of position.
 - a. true
 - b. false

CMHIFL CODE RED INSERVICE EDUCATION – POST QUIZ

DATE: _____ NAME: _____

TRUE AND FALSE – CIRCLE THE CORRECT ANSWER:

- T F The Patient Nurse or Cart Nurse sets up the AED.
- T F Code Red is CMHIFL's procedure for an organized and efficient response to any life threatening medical emergency involving only patients at Fort Logan.
- T F It is each individual's responsibility to obtain gloves at any Code Red Event.
- T F When a Code Red Event or drill occurs and only one nurse is working on the responding unit, the nurse is expected to respond and assist with the Code Red and leave her/his unit without a nurse for the time required period and take the keys with her/him.
- T F In the Fort Logan system, you do not and cannot use "911".
- T F CMHIFL's system is designed to provide advanced life support in case of emergency.
- T F The AED can be activated without an MD being present.
- Y N Must a form 465 (Outside Consult) be completed and accompany the patient at the time of transfer?

MULTIPLE CHOICE – CIRCLE THE CORRECT ANSWER:

1. The correct number of liters of oxygen per minute to be used in any resuscitation effort is:
 - A. Two
 - B. Four
 - C. Six
 - D. Eight - Twelve
2. During the Code Red, which of the following is true about the suction machine?
 - A. Unplug the suction machine adapter from the wall before transporting the crash cart.
 - B. Place the suction machine at the head of the patient.
 - C. Nurses may suction secretions PRN without a physician's order.
 - D. All of the above
3. In a Code Red emergency, when do you activate the Code Red Alarm?
 - A. Just before the ambulance arrives on the scene.
 - B. When the AED is in place.
 - C. When the physician gives a verbal order to call an ambulance.
 - D. When it has been established that a Code Red emergency exists.

4. Who is responsible for calling the ambulance?
 - A. The operator
 - B. The human service worker
 - C. The charge nurse
 - D. None of the above

5. The lorazepam (ativan) Injectable is stored:
 - A. In the crash cart
 - B. In the med room refrigerator
 - C. In the treatment room
 - D. None of the above

6. Who is expected to wear gloves during a Code Red?
 - A. The physician, the patient nurse and the cart nurse
 - B. The rescuers (individuals performing CPR)
 - C. The recorder
 - D. All of the above

7. There is one person who is to access the cart during any drill or event. She/he is:
 - A. The patient nurse
 - B. The cart nurse
 - C. The Core Leader
 - D. The physician

8. How does the nurse restock the cart after the contents have been utilized during an off shift?
 - A. Restock the cart from supplies kept on the unit.
 - B. Leave the cart as is; wait to reorder and restock on the next business day.
 - C. Immediately following a Code Red Event, place all of the supplies from the drawers used into separate plastic or paper bags and clearly label by drawer number. Send the labeled bags to CMS with a Safety Officer and request the appropriate bags be returned to you. Restock the cart and immediately secure with plastic lock.
 - D. None of the above

9. The suction machine is placed:
 - A. At the feet of the patient
 - B. On the left side of the patient
 - C. On the right side of the patient
 - D. At the head of the patient

FILL IN THE BLANKS:

1. List at least three duties of the Core Leader:

- a. _____
- b. _____
- c. _____

2. Who assumes the role of Core Leader in every drill or Code Red Event?

3. List four reasons to initiate a Code Red:

- a. _____
- b. _____
- c. _____
- d. _____

Name:

Date:

ABUSE TRAINING

1. Non-accidental use of physical force that results in bodily injury, pain or impairment is:
 - a. Educational neglect
 - b. Emotional abuse
 - c. Physical abuse
 - d. Exploitation
2. Susan is a 25-year-old single female admitted with a diagnosis of bipolar disorder. She is defensive regarding others speaking poorly of her boyfriend. She also is easily startled, presents with bruises on her arms and face. This may be an example of:
 - a. Educational neglect
 - b. Child sexual abuse
 - c. Medical neglect
 - d. Domestic violence
3. When a parent or caretaker, either through action or omission, fails to provide for a child's education, this is considered:
 - a. Educational neglect
 - b. Emotional abuse
 - c. Lack of supervision
 - d. Domestic violence
4. A developmentally disabled patient presents with a painful and noticeable physical ailment that has not been treated. Clinical staff should be concerned about the possibility of:
 - a. Self-injurious behavior
 - b. Medical neglect
 - c. Exploitation
 - d. Lack of supervision
5. During family visits, staff notice a family member constantly belittling and insulting a patient. The patient presents with low self-esteem and frequently makes self-deprecating comments. There is a likelihood that the patient is a victim of:
 - a. Medical neglect
 - b. Emotional abuse
 - c. Abandonment
 - d. Lack of supervision
6. Sexual abuse may include the following:
 - a. Non-consensual sexual intercourse
 - b. Touching of genitals, buttocks, or breasts
 - c. Exposure to pornography
 - d. All of the above
7. The sister of a patient wants to have her brother sign a Power of Attorney to sell his home to meet their expenses. He has sufficient income to maintain the home. There is a possible concern that this could be an example of:
 - a. Institutional neglect
 - b. Caretaking
 - c. Exploitation
 - d. None of the above
8. Two patients on an adult unit are discovered having sexual relations while hospitalized. The female patient is married and has been very disorganized, manic, and hyper-sexual. This situation may involve:
 - a. Institutional neglect
 - b. Sexual abuse
 - c. Domestic Violence
 - d. Both a. and b.
9. A patient was involved in a physical intervention with a take down. The patient and staff sustain injuries. The response by staff should be to:
 - a. Assure that medical evaluation and care is provided to the patient and staff
 - b. Report the injury sustained by the patient on the CMHIFL Incident and Injury form and notify the Director's Office.
 - c. Complete and submit an Injury/Exposure On the Job Form (IOJ)
 - d. All of the above
10. Guidelines for reporting suspected abuse or neglect are found in:
 - a. CMHIFL Policy and Procedure Manual
 - b. Staff Directory
 - c. Human Resources Office
 - d. The CMHIFL Medical Records Department.



CMHI-FL Staff Development

Cultural Awareness Post-Test

Name _____

Date _____

Department/Team _____

Please Circle the Correct Response

1. What are the elements of a culturally competent system?
 - A. Values diversity
 - B. Capacity for cultural self-assessment
 - C. Conscious of cross-cultural dynamics
 - D. Cultural knowledge
 - E. All the above

 2. Knowing that cultural differences as well as similarities exist, and not assigning values to these differences is called:
 - A. Cultural competence
 - B. Cultural awareness
 - C. Cultural sensitivity
 - D. Stereotyping

 3. Which of the following is true about ethnic identity?
 - A. Ethnic identity is identical to racial identity
 - B. One sense of belonging to an ethnic group
 - C. A negative feeling toward a group
 - D. Includes membership in professional organizations

 4. Benefits of cultural competence in healthcare include:
 - A. Promotes patient adherence to treatment
 - B. Builds trust in a relationship
 - C. Positively affects clinical outcomes
 - D. Meets government regulations
 - E. All the above

 5. Self-awareness requires recognition of our own biases and the limits of our cultural competence.
 - A. True
 - B. False
- 

6. Cultural self-awareness helps in accomplishing the following except:
- A. Identifying one's own ethnic identity
 - B. Identifying one's cultural identity
 - C. Becoming aware of our prejudices and biases
 - D. Examining how our cultural background has contributed to our worldview
 - E. Recognizing our superiority over others
7. A goal of cultural competency is:
- A. To learn everything possible about different cultures
 - B. To speak two different languages
 - C. To utilize resources such as the Cultural Sensitivity Manual
 - D. To read one book on Cultural Sensitivity
8. All of the following are dimensions of cultural competence except:
- A. Values and attitudes
 - B. Communication styles
 - C. Culturally appropriate environment
 - D. Culturally competent persons who do not have prejudices and biases
9. All of the following statements about cultural competence are true except:
- A. Knowledge-based skills
 - B. No single definition of cultural competence is yet universally accepted.
 - C. Set of academic and interpersonal skills
 - D. Cultural competence can be developed after attending a single educational program
10. All of the following statements about culture are true except:
- A. A common heritage or set of beliefs, norms, and values
 - B. It can account for variations in how consumers communicate their symptoms and which ones they report.
 - C. The practice of health professionals in the U.S. is rooted in the culture of scientific medicine.
 - D. Differences between worldviews of healthcare providers and their clients do not affect how care is delivered.

NAME _____
DATE _____
TEAM / DEPARTMENT _____

HIGH RISK ASSESSMENT

1. WHO MAKES AN ASSESSMENT THAT A PATIENT IS AT RISK?

2. LIST THREE RISK FACTORS INDICATING THE NEED FOR CLOSER OBSERVATION.

3. WHAT NEEDS TO BE DONE IF A PATIENT AT HIGH RISK REFUSES TO COMPLY WITH OBSERVATION?

4. PLEASE COMPLETE A HIGH-RISK ASSESSMENT BASED ON THE FOLLOWING SCENARIO:

WRITE A HIGH-RISK ASSESSMENT THAT REFLECTS YOUR ASSESSMENT OF THE SITUATION AND HOW YOU INTEND TO ADDRESS THE POTENTIAL RISK.

Robert is a 33-year-old patient assigned to you for the evening shift. According to the brief history you received during report, Robert was admitted today after assaulting his Grandmother at home, by throwing a coffee mug at her. Robert has a history of Paranoid Schizophrenia and stopped taking his meds before he was admitted.

You observe Robert gesturing in the mirror with closed fists, and engaging in frequent self-talk, during which you hear him say, "They'll be sorry when I get hold of them." He engages in rapid pacing, bumping into other patients and staff, at times. He watches everyone, as they come onto the unit. When this behavior is identified, Robert glares and walks away. Finally, Robert agrees to 1:1 by saying, "This is pointless. I shouldn't be here, and I'll get out of this place somehow."

He then walks away and begins shadow-boxing in the mirror, with angry self-talk.

Please write a high-risk assessment chart note on the following page.