

# TRAINING ATTESTATIONS and TESTING NEO FAST TRACK for Clinical Staff

**Step One – Review Applicable Training Materials using one of the following links:**

**\*\*\*Registered Nurses Only\*\*\* – Click Here to Review Training Materials**

**\*\*\*All Other Staff\*\*\* – Click Here to Review Training Materials**

**Step Two – Sign the Training Attestations:**

## **Restrictive Interventions**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

## **Four Core Principles**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

## **Hospital Overview**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

## **HIPAA**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

## **Patient Rights and Reporting**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Age Specific**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Infection Control**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Treatment Team Process**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Performance Improvement / EMTALA / ETHICS**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Workplace Violence**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Fire Safety**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**General Safety**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Computer Use**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Diversity and Cultural Sensitivity**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Team Building**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Conflict Management**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Coronavirus COVID-19**

By signing on the line below, I attest that I have completely read, and I understand, all information included in this training module.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Step Three – Complete the tests below:**

**CENTRAL REGIONAL HOSPITAL**

**Assurance of Human Rights for Patients**

- I certify that I have attended Human Rights training for persons in my staff category (via Hospital Orientation or Annual Update Training) and I have read the Patients' Rights Training material and understand its contents.
- I understand the importance of upholding patients' rights and I agree to abide by the hospital's policies and procedures as presented in the training materials.
- I have read and discussed with my supervisor the guidelines for staff regarding the abuse of patients. I understand the content and agree to abide by the regulations.

**Confidentiality Agreement**

- I understand that I may have direct or indirect access to confidential individually identifiable health information in the course of performing my work activities.
- I agree to protect the confidential nature of all individually identifiable health information to which I have access.
- I understand that there are state and federal laws and regulations that ensure the confidentiality of an individual's identifying health information.
- I understand that there are DHHS policies and agency procedures with which I am required to comply related to the protection of individually identifiable health information.
- I understand that my failure to observe and abide by these policies and procedures may result in disciplinary action, which may include dismissal and/or contract termination, and/or punishment by fine and/or imprisonment.
- I understand how I am expected to ensure the protection of individually identifiable health information. Should questions arise in the future about how to protect information to which I have access, I will immediately notify my supervisor.
- I have been informed that **this signed agreement will be retained on file for future reference.**

**Effective April 14, 2003**

PRINT NAME: \_\_\_\_\_

Employee/Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**CRH 37.059**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**CLINICAL ORIENTATION**

**Restrictive Interventions**

1. Reducing Seclusion and Restraint is a priority of CRH.  
True                              False
2. What is the purpose (s) of debriefing a patient after an episode?
  - a. To identify what led to the incident
  - b. To counsel the patient of any trauma that may have resulted from the episode
  - c. Ensure the patient's physical well-being and psychological comfort
  - d. All the above
3. Where can the Restrictive Interventions Policy and Procedures be found?
  - a. Human Resources Manual
  - b. Clinical Practice Manual
  - c. Safety Manual
4. Special effort should be made to avoid placing some patients in mechanical restraint. What are some of these conditions?
  - a. Pregnancy
  - b. Currently vomiting
  - c. A history of sexual abuse/rape while in restraints
  - d. All the above
5. Patients are to be monitored during a mechanical restraint to preserve their safety, rights dignity, and well-being.  
True                              False
6. Which intervention is least restrictive?
  - a. De-escalation
  - b. Manual Restraint
  - c. Seclusion
  - d. Mechanical Restraint
7. CRH S & R Policies and procedures ensure the rights and safety of patients as specified in:
  - a. NC Human Rights and Regulations
  - b. DHSR/CMS Regulations
  - c. Joint Commission Standards
  - d. All the above
8. A restrictive intervention may not be used for the convenience of staff.  
True                              False

9. The patient must be released from the restrictive intervention when he/she meets the criteria for release specified in the Physician order.

True

False

10. When a patient is in the Seclusion or Mechanical Restraint, how frequently must staff offer or consider the use of the toilet, and fluids/food?

- a. At least every 2 hours
- b. At least every hour
- c. At least every 15 minutes

## Hospital Orientation **Infection Control Test**

1. The infection control preventionist and on the CRH intranet under IC Policy Manuals are the best sources of finding information about transmission based precautions, hand hygiene, and blood borne pathogens.  
True False
  
2. The CRH Antibiotic Stewardship Program strives to reduce the risk of antimicrobial resistance to antibiotics.  
True False
  
3. Infections are caused by
  - a) Bacteria
  - b) Viruses
  - c) Parasites
  - d) All of the above
  
4. What is the single most effective means of preventing the spread of infections?
  - a) Use of antibiotics
  - b) Use of condoms
  - c) Handwashing
  - d) Covering your nose when sneezing
  
5. The use of a Biohazard sign on a door or trash can means
  - a) There is blood, body fluids, or contaminated waste behind the door/in the container
  - b) The contents of the container can be handled without gloves or other appropriate personal protective equipment
  - c) The contents of the container can be disposed of with the regular trash
  - d) The contents of the container are not really all that much to worry about.
  
6. Goggles are more effective than regular glasses for prevention of droplets getting into the eyes.  
True False
  
7. A patient can get an infection after being admitted to the hospital.  
True False
  
8. At CRH sharps' containers are disposed of:
  - a) By placing in the dumpster in a biohazard bag
  - b) When completely full passed fill line
  - c) By leaving outside central supply or the morgue
  - d) When  $\frac{3}{4}$  full and obtaining the key from house coordinators afterhours or central supply during business hours to place in biohazard storage area, located in the morgue.
  
9. Standard precautions for staff against catching and spreading disease are
  - a) Universal blood and body fluid precautions
  - b) Hand Hygiene
  - c) PPE (Personal Protective Equipment)
  - d) All of the above
  
10. Gloves must be worn when removing all bed linens.  
True False

## General Safety

Name: \_\_\_\_\_

1 A tornado "watch" means

- A. You can watch the tornado as it approaches
- B. Conditions are favorable for the formation of tornados
- C. A tornado has been spotted and is fast approaching
- D. All of the above

2 Alcohol and illegal drugs

- A. Are allowed on CRH campus as long as you keep them in your locker
- B. Are allowed on CRH campus as long as you keep them locked in your car
- C. Are allowed to be used by staff as long as they use them on their breaks
- D. Are not allowed on CRH campus

3 All CRH buildings are tobacco-free, which means

- A. You can smoke a pipe inside the buildings, but not cigarettes
- B. Smokeless tobacco products may be used inside the buildings
- C. You are not allowed to use tobacco products inside the buildings
- D. You may chew tobacco inside the buildings, but you cannot spit

4 All training records are on file and documented in:

- A. Human Resources
- B. The Safety Director's Office
- C. Staff Development
- D. The Clinic

5 Each unit keeps on file which Safety Data Sheets (SDS)?

- A. Just a few of the ones for the harmless chemicals
- B. All SDS for the entire hospital
- C. Just the ones for the most hazardous chemicals
- D. All the SDS that are specific to the unit's own area

6 Fire and explosion data for a product or chemical can be found

- A. On the SDS
- B. In the Safety Manual
- C. In the Infection Control Manual
- D. In the Clinical Care Manual

7 How often do employees receive safety training?

- A. Once yearly
- B. Every 2 years
- C. Every 10 years
- D. Just before they retire



8 If you drive open-bed pickup trucks, you should

- A. Not keep items that could be used as weapons in the back of the truck where patients could get to them easily
- B. Be nice and haul your co-workers' trash to the dump
- C. Not have anything in the back
- D. Have a lot of friends

9 If you find a bomb, what should you do?

- A. Don't touch it!
- B. Call your co-workers so they can come and see it
- C. Call the hospital director so he will come and pick it up
- D. Remain in the area in case the media wants to ask you questions

10 In a disaster/emergency, the code blue team:

- A. Goes on vacation
- B. Becomes the Disaster Response Team
- C. Takes over the hospital
- D. Leaves the situation for the other staff to deal with

## Workplace Violence

Name: \_\_\_\_\_

1. Workplace violence only refers to physical aggression
  - a. True
  - b. False
2. The physical and psychological safety of staff and patients is CRH's #1 priority
  - a. True
  - b. False
3. CRH has a zero-tolerance policy for violence
  - a. True
  - b. False
4. Universal Safety Precautions means that it is everyone's responsibility to identify, address, and report potential risks, hazards, and changes in patient behavior
  - a. True
  - b. False
5. A history of violence is not a risk factor for future violence
  - a. True
  - b. False
6. Everyone, regardless of their position, can reduce the likelihood of violence by responding to patients respectfully, patiently, and explaining their reasoning, especially when setting limits
  - a. True
  - b. False
7. An employee must report that they have a protective or restraining order against another person to their supervisor.
  - a. True
  - b. False
8. Staff are expected to wear a whistle at all times
  - a. True
  - b. False
9. All threats should be taken seriously and be reported to a supervisor, even if you hear it "second-hand"
  - a. True
  - b. False
10. In an emergency, staff should call "44" to reach the operator
  - a. True
  - b. False

## Fire Safety

Name: \_\_\_\_\_

1 "PASS" stands for PULL (the pin), AIM (at base of the fire with the extinguisher), SQUEEZE (the handle), SWEEP (the extinguisher foam back and forth).

- A. True
- B. False

2 "RACE" stands for Run Around Creating Excitement

- A. True
- B. False

3 A "large" fire is beyond your control to extinguish without assistance.

- A. True
- B. False

4 A "small" fire is within your control to extinguish.

- A. True
- B. False

5 An ABC fire extinguisher will put out the 3 major fire types.

- A. True
- B. False

6 Emergency floor plans help you to know the location of exits, shelter areas, and emergency equipment.

- A. True
- B. False

7 For fire extinguishers that are kept locked up, a key to open the door/cabinet is left in the lock to provide quick access.

- A. True
- B. False

8 Head counts are not important because in a fire, it's every man for himself.

- A. True
- B. False

9 If I can't remember what RACE and PASS mean, I have no other way of finding it.

- A. True
- B. False

10 If you have to relocate during a fire, you should automatically head for the nearest door.

- A. True
- B. False

# Computer Use

Name: (please print) \_\_\_\_\_ Date: \_\_\_\_\_

1. It is okay to work under another User's account or share your password with someone else.

- A. True
- B. False

2. Personally owned USB devices are allowed.

- A. True
- B. False

3. If approved to take my laptop home I'm responsible if it's stolen from my vehicle.

- A. True
- B. False

4. It is okay to move your computer to another office without notifying MIS.

- A. True
- B. False

5. At the end of my shift, I leave my account logged on so the next shift can do their work.

- A. True
- B. False

6. I need to take my laptop home to finish some important work, I should contact CRH Hospital Management for approval first?

- A. True
- B. False

7. Since I'm the primary user of my PC, I can go to my favorite obscene website on my break or at lunch time.

- A. True
- B. False

8. Someone stealing a laptop is a reportable offense.

- A. True
- B. False

9. It's okay to send the new staff member on AAU personal emails, even though she said she wasn't interested in communicating with me.

- A. True
- B. False

10. Security incidents are reported to the CRH IT Security Officer, located in MIS.

- A. True
- B. False

Name: \_\_\_\_\_

Date: \_\_\_\_\_

### PATIENT RIGHTS TEST

[True or False]

1. Only knowledge of policy is necessary to achieve dignified treatment and respect for the client. [True or False]
2. It is a crime to willfully deprive or cause to be deprived of any person those rights, privileges, or immunities secured or protected by the Constitution and laws of the United States. [True or False]
3. It is not the policy of North Carolina to assure the basic human right of each client of a facility. [True or False]
4. Clients have the right to voice a grievance. [True or False]
5. It is okay to speak, if you accidentally become angry, and be disrespectful toward a client. [True or False]
6. If you report any suspicion of abuse, neglect, or exploitation to your supervisor, you need not report it to the Advocate. [True or False]
7. Only two meals are required to be provided to a client daily if they are balanced and provide a nutritional diet. [True or False]
8. Taunting/Baiting/Glaring are signs of potential abuse and may be cause for an Advocate investigation. [True or False]
9. The Human Rights Committee meets on a regular schedule is open to the public. [True or False]
10. The on-call Advocate is available to assist clients and provide technical assistance to Staff. [True or False]

Name: \_\_\_\_\_

Date: \_\_\_\_\_

### Person Centered Treatment Planning

1. An intervention:
  - A. Describes what staff member(s) will do to help the patient attain the short-term goal.
  - B. Should reflect the daily things that nurses routinely do with all patients.
  - C. Describes what the patient will do by themselves to attain the short-term goal.
  - D. Describes what a patient wants to achieve to get discharged.
  
2. By CRH policy, on long term units:
  - A. The master treatment plan must be reviewed within 10 days of transfer and then every 45 days for the first year.
  - B. The master treatment plan must be reviewed within 5 days of transfer, then every 60 days thereafter.
  - C. The master treatment plan must be reviewed with 10 days of transfer and every 60 days thereafter.
  - D. The master treatment plan must be reviewed within 10 days of transfer and re-written after 2 years.
  
3. Long term goals:
  - A. Are small steps that are obtainable and measurable.
  - B. Describe what staff members will do.
  - C. Define what needs to happen for a patient to be discharged and/or be successful in the community.
  - D. Indicate when and how the goal will be achieved.
  
4. Short term goals:
  - A. Are small steps that are obtainable and measurable.
  - B. Are small steps the patient takes toward achieving her long-term goal.
  - C. Are written in the patient's words or language she can understand.
  - D. All of the above
  
5. The best description of a person-centered treatment plan is a plan
  - A. That focuses on crisis stabilization.
  - B. In which the team decides what is best for the patient.
  - C. In which only the patient can decide on his goals.
  - D. That is a partnership between the patient/family and the team.
  
6. The best example of a long-term goal is:
  - A. Mrs. Jones is unable to remember to take her medicine.
  - B. Mrs. Jones will learn 2 ways to help her remember to take her medicine.
  - C. Mrs. Jones will take medications and use coping skills to manage her symptoms (of hearing voices and feeling scared of others) so she can live safely in the community.
  - D. Social work will ask the patient's guardian to purchase a pill box.

7. The best example of an intervention is:
  - A. Nursing staff will remind patient she is mentally ill so she will take her medicine.
  - B. Patient will go to Medication Education group so she can learn why she should take her medicine.
  - C. MD will provide forced medications and monitor for side effects.
  - D. Nursing staff will provide Life Skills for Recovery groups 5x/week for 45 min/day to help patient learn 3 reasons why it's important to take her medicine.
  
8. The best of example of a problem, as written by the team, is:
  - A. John Doe has paranoid schizophrenia.
  - B. John Doe becomes aggressive in response to paranoid delusions, causing negative social consequences.
  - C. John Doe hits people when he thinks they are talking about him.
  - D. John Doe uses inappropriate coping mechanisms to deal with hostile impulses.
  
9. The best of example of a short-term goal is:
  - A. John Doe will not hit people for 5 days in a row.
  - B. John Doe will use coping skills (counting to 10, talk to staff, color) when stressed instead of threatening or hitting others for 10 of 14 days.
  - C. John Doe will talk to a staff member every time he feels bad about something.
  - D. John Doe will take Haldol.
  
10. The CRH policy for admissions units requires:
  - A. MTP by day 10, first review at day 30, reviews every 30 days thereafter.
  - B. MTP by day 10. First review by day 24, then every 14 days for 2 additional reviews.
  - C. MTP by day 7. First review by day 14, then every 30 days for the first year.
  - D. MTP by day 3, first review by day 21, then every 14 days for the first 6 months
  
11. Which of the following components is not part of a Master Treatment Plan?
  - A. Long-term goals that define what needs to happen for the patient to be discharged.
  - B. Short-term goals that are obtainable, measurable and observable.
  - C. Multi- or interdisciplinary interventions that describe what staff members will do.
  - D. Thorough descriptions of the daily interventions that nurses routinely do.
  
12. Which staff members are required to be at the treatment team meetings?
  - A. MD, nurse, psychologist
  - B. MD, psychologist, nutritionist
  - C. MD, nurse, social worker
  - D. MD, nurse, psychosocial treatment advisor

## Age and Population Specific Competencies

Name: (please print) \_\_\_\_\_ Date: \_\_\_\_\_

1. It is not important to treat the mentally ill with dignity and respect

- A. True
- B. False

2. What are some of the characteristics of the patients on the CAU?

- A. Active and intense
- B. Can't always regulate themselves
- C. Can't always tell you what is wrong.
- D. React quickly
- E. Answers 1 and 2 only
- F. All of the Above

3. Medication non-compliant is one of the reasons geriatric clients are admitted.

- A. True
- B. False

4. Specific goals of CTU are:

- A. Empower each patient through their own recovery
- B. Encourage each patient to help develop or improve skills
- C. Enhance each patient with a sense of personal response
- D. All of the above

5. The CAU hospital school functions as a part of the patient's overall treatment plan.

- A. True
- B. False

6. Many patients on the child and adolescent unit (CAU) have a history of abuse, neglect, and school failure.

- A. True
- B. False

7. Which of the following is a principle of adult learning?

- A. Adults have few experiences and do not want to share them
- B. Adults do not need to know why they are learning something
- C. Adults want to be responsible for their own decisions



D. Adults always learn at the same pace as children

8. When teaching an older adult the material should be presented in a slow and understandable manner.

A. True

B. False

9. Patients have opportunities to practice the skills they learn while hospitalized on CTU

A. True

B. False

10. The Behavior Management System on CAU supports the idea that:

A. all children are good.

B. all children need praise.

C. children can thrive in a nurturing environment.

D. children learn from us and the way we treat them.

E. All of the above

1. Inclusion can be demonstrated by:
  - A. Engaging with the same co-workers every day to perform different job duties
  - B. Asking your co-worker to bring you lunch
  - C. Seeking input, ideas, and advice from co-workers who might provide valuable insight from a different perspective
  - D. Volunteering to pick up additional shifts within your department when short
  
2. Employment decisions made on the basis of ethnicity, pregnancy, sexual orientation, or veterans status are unlawful:
  - A. True
  - B. False
  
3. Diversity refers to:
  - A. Many different people
  - B. Recognizing the value of others
  - C. Appreciating the unique talents of others
  - D. Appreciating the contributions of all
  - E. All of the above
  
4. How can you develop cultural competence?
  - A. Identify your strengths to improve a situation
  - B. Allow the other person to complete their thoughts
  - C. Allow others to be different
  - D. Listen and reflect back
  - E. Talk with others about their culture
  - F. Read up on other cultures
  - G. All of the above
  
5. How do we define “diversity”?
  - A. Learned and shared beliefs
  - B. The “right” way to think
  - C. The right to be different
  - D. Appreciate, value and utilize talents of all individuals

6. What is an example of respectful communication?

- A. Avoid looking at your watch while speaking with someone
- B. Listening to others without interrupting
- C. Saying please and thank you
- D. All of the above
- E. None of the above

7. What are some barriers to understanding?

- A. Assumptions
- B. Misinterpretation
- C. Stereotypes
- D. Preconceptions
- E. All of the above

A. 8. What do most cultures share but these may mean different things to different cultures?

- B. Cooperation, mutual respect
- C. Understanding
- D. Love, truth, fairness, freedom

9. What is a CRH Value?

- A. Providing patient centered jobs
- B. Providing employee centered jobs
- C. Being People-focused
- D. Providing medical care for psych patients

10. What is the key to cultural sensitivity?

- A. To know what to do in every situation
- B. To become an advocate for the patient
- C. To develop & nurture mutual respect for each other
- D. To satisfy a federal requirement

# Cultural Competency

Name: (please print) \_\_\_\_\_ Date: \_\_\_\_\_

1. What is the CRH vision?

- A. Person-centered care
- B. Employee centered jobs
- C. Learning an occupation
- D. Medical care for psych patients

2. How can you develop cultural competence?

- A. Identify your strengths to improve a situation
- B. Allow the other person to complete their thoughts
- C. Allow others to be different
- D. Listen and reflect back
- E. Talk with others about their culture
- F. Read up on other cultures
- G. All of the above

3. Diversity refers to:

- A. Many different people
- B. Recognizing the value of others
- C. Appreciating the unique talents of others
- D. Appreciating the contributions of all
- E. All of the above

4. Why should we learn about cultural sensitivity?

- A. You find out the age range of your co-workers
- B. It helps you develop mutual respect for each other
- C. It helps you utilize the talents of those around you
- D. You can find out who agrees with you

5. What do most cultures share but these may mean different things to different cultures?

- A. Cooperation, mutual respect
- B. Understanding
- C. Love, truth, fairness, freedom

6. What are some barriers to understanding?

- A. Assumptions
- B. Misinterpretation
- C. Stereotypes
- D. Preconceptions
- E. All of the above

7. What things are part of our personal secondary culture?

- A. Education, religion, profession
- B. Gender, race, age
- C. Ethnicity, socio-economic background

# Cultural Competency

8. What are non-verbal cues?

- A. The ability to send a message without words
- B. Eye contact or lack
- C. Touching others
- D. Leaning toward others
- E. All of the above

9. A culture can be changed by:

- A. Salary increases
- B. Shorter work days
- C. Employees that learn & share from/with each other
- D. Hiring more people

10. What is the key to cultural sensitivity?

- A. To know what to do in every situation
- B. To become an advocate for the patient
- C. To develop & nurture mutual respect for each other
- D. To satisfy a federal requirement

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**HOSPITAL ORIENTATION**  
**Performance Improvement / EMTALA/Risk Management/Ethics**  
**Test A**

1. Which of the following is/are a 2021/22 National Patient Safety Goal(s)?
  - A. Improve the safety of using medications
  - B. Improve communication between staff
  - C. Assess patients for safety risks (suicide)
  - D. All of the above
  
2. What can surveyors do when they arrive at the hospital?
  - A. Interview patients
  - B. Look at patient records
  - C. Observe patient care
  - D. All of the above
  
3. Performance Improvement looks for a weakness in how we carry out an activity, not in the performance of an individual staff person.

True                                  False
  
4. CRH's performance improvement approach is called the PADA Cycle.

True                                  False
  
5. Which of the following is a benefit of maintaining accreditation?
  - A. Assist the hospital in improving the quality of care
  - B. Enhances community confidence
  - C. Used to meet certain Medicare requirements
  - D. All of the Above
  
6. The most serious type of event are referred to as Sentinel Events.

True                                  False
  
7. CRH's Code of Ethics does not have to be followed by staff.

True                                  False
  
8. Which of the following is a step in Risk Management?
  - A. Identify Risk
  - B. Analyze Risk
  - C. Control Risk
  - D. All of the Above
  
9. When a potential patient presents at CRH's Admitting Office, his/her treatment cannot be delayed because they do not have insurance or the ability to pay?

True                                  False
  
10. Performance Improvement is everyone's job- not just Hospital Management.

True                                  False

# HIPAA

Name: (please print) \_\_\_\_\_ Date: \_\_\_\_\_

1. Medical records do not have to be protected from unauthorized users.
  - A. True
  - B. False
  
2. PHI from CRH must be shredded.
  - A. True
  - B. False
  
3. Only direct care employees have an obligation to protect confidentiality at CRH.
  - A. True
  - B. False
  
4. PHI can be discarded in the trash at CRH.
  - A. True
  - B. False
  
5. Penalties may be assessed if an employee accidentally violates confidentiality under HIPAA.
  - A. True
  - B. False
  
6. It is okay for a CRH staff member to give (or share with) a coworker their CRH User ID and Password to access the CRH computer system.
  - A. True
  - B. False
  
7. Health Care Workers' access to PHI is limited to "need to know" and "minimal necessary".
  - A. True
  - B. False
  
8. CRH must protect PHI at all times.
  - A. True
  - B. False
  
9. PHI must be maintained in a secure environment.
  - A. True
  - B. False
  
10. If you need to release patient information and are unsure you should ask your co-worker.
  - A. True
  - B. False