

Name: _____

Score: _____

2019 Level II Competence and Policy Review Test

1. AIDET is a communication tool that helps us achieve our service and quality goals. What does AIDET stand for?
 - a. Acknowledge, Introduce, Describe, Explanation, Tell
 - b. Acknowledge, Instruction, Duration, Explanation, Thank You
 - c. Acknowledge, Introduce, Duration, Explanation, Thank You
 - d. Acknowledge, Invite, Duration, Explanation, Thank You
2. The tool we used to implement process improvement is
 - a. MDAIC
 - b. ICMDA
 - c. DMAIC
 - d. AIDMC
3. For ethical issues concerning patient care, the Ethics Committee can be accessed by
 - a. Completing an Ethics consult request form
 - b. Calling Risk Management
 - c. Contacting an on-call member through the communications operator
 - d. Calling hospital administration
4. Upon learning of a patient complaint, the first thing an employee should do is
 - a. Notify your supervisor
 - b. Complete an occurrence report form
 - c. Input the complaint through the RL Solutions link on the Intranet
 - d. Take appropriate corrective action as is appropriate for your scope of service
5. An example of an occurrence that should be reported is:
 - a. Accidents with or without injury
 - b. Medication errors, Treatment delays & IV related complication
 - c. Mishaps due to faulty/defective equipment
 - d. All of the above
6. The purpose of an investigation of a sentinel event is to do all of the following EXCEPT:
 - a. Determine what went wrong with the process
 - b. Identify the person responsible and discipline him/her
 - c. Find strategies to prevent future occurrences
 - d. Find opportunities for improvement
7. It is the policy of OU Medicine to provide written information to all individuals _____ years of age and older, and emancipated minors, who are receiving medical care about their rights under state law to make decision concerning medical care and formulate an Advanced Directive.
 - a. 12
 - b. 18
 - c. 21
 - d. 65

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8. If a patient does not have an advance directive, but would like more information about it, the patient should be referred to
 - a. his/her Physician
 - b. the Clinical Coordinator
 - c. the Chaplains/Pastoral Care
 - d. Social Services
9. Employees have the right to report issues and concerns to regulatory bodies such as The Joint Commission, Oklahoma Department of Human Services or Oklahoma Department of Health.
 - a. True
 - b. False
10. Every hospital death will be recognized as a potential organ/tissue donor.
 - a. True
 - b. False
11. Under the federal False Claims act, any person that knowingly submits false or fraudulent claim for payment of US Government funds is liable for significant penalties and fines.
 - a. True
 - b. False
12. The only areas authorized to release information to the media are
 - a. Administration
 - b. Public Relations/Marketing
 - c. Clinical Coordinators, at the OKC Campus
 - d. Both B and C
13. Patients will be informed of their privacy rights via the:
 - a. Patient Bill of Rights
 - b. Notice of Privacy Practice brochure
 - c. OU Medicine website
 - d. All of the above
14. Patients rights include all of the following EXCEPT:
 - a. The right to appropriate pain management
 - b. The right to be free from restraint, unless medically necessary
 - c. The right to file a complaint
 - d. The right to be treated with respect
 - e. The right to ignore hospital behavioral expectations
 - f. The right to safety and security in the hospital
15. OU Medicine employees wanting information from their medical record should
 - a. Print one from Meditech
 - b. Fill out a "Release of Information" form in the Medical Records Department
 - c. Call the Business Office
 - d. None of the above
16. Examples of HIPAA violations include all of the following except:
 - a. Taking a picture of a patient with your cell phone to show to students

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- b. Forwarding an email from your personal computer with a picture of a patient
 - c. Speaking to a family member who has provided a PIN number about a patient's condition
 - d. Explaining the patient's treatment plan to him while his room is full of visitors
17. Upon receiving a potentially suspicious package, you should immediately alert your supervisor.
- a. True
 - b. False
18. In the event of an emergency requiring decontamination, the hospital operator will announce overhead
- a. Mass Casualty Disaster
 - b. Medical Disaster requiring decontamination
 - c. All personnel activate the Disaster Response Plan at this time
 - d. Code Orange – all available personnel please report to your assigned areas.
19. During a disaster/activation of the Emergency Preparedness Plan, each treatment area will maintain a record of patients in and out of their area including patient tracking number, arrival time and departure time.
- a. True
 - b. False
20. Upon activation of the Emergency Preparedness Plan, staff shall stay on/report to their department.
- a. True
 - b. False
21. The term used to designate a fire alarm is
- a. Condition Red
 - b. Code Red
 - c. Code Black
 - d. Condition Black
22. If a fire is in your immediate area, your actions should follow the R.A.C. E. acronym. (Rescue anyone in immediate danger, activate the alarm, contain/confine the fire, extinguish the fire if it is safe to do so).
- a. True
 - b. False
23. If a fire is not in your area, you should do all the following EXCEPT:
- a. Open all doors
 - b. Assure patients and families that the situation is under control
 - c. Leave someone by the phone
 - d. Maintain normal operations
24. Floor Evacuation (*vertical evacuation of patient to a lower floor*) shall only occur on the order from the Administrator on-call, the House Supervisor, or the Fire Department.
- a. True
 - b. False
25. If the emergency generators do not restore power within 10 seconds of loss of normal power, an employee should report the outage to Facilities and Maintenance Dispatch.
- a. True
 - b. False

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26. When a tornado warning in our area is issued by the National Weather Service, the overhead announcement made will state:
 - a. A tornado warning is issued
 - b. A Severe Weather Alert is now in effect
 - c. Code Black
 - d. Condition Black
27. During a Code Black, it is important to ensure all patients/families/visitors have shoes on or protective foot covering readily available.
 - a. True
 - b. False
28. Code Blue is the term designated for a patient, staff member or visitor who
 - a. Has suffered a cardiac or respiratory arrest and requires cardiopulmonary resuscitation
 - b. Has fallen in a stairwell
 - c. Has a do not resuscitate order in his medical record
 - d. Is on suicide precautions
29. Upon discovering a patient, staff member, or visitor who is not breathing an employee should begin resuscitation if trained in CPR, initiate AED (if available) and call a Code Blue.
 - a. True
 - b. False
30. Upon discovering an ill or injured person, an employee should report a "person down."
 - a. True
 - b. False
31. Upon discovering an infant or child missing, an employee should:
 - a. Call Police Services and report a Code Pink
 - b. Call Police Services and report a Code Adam
 - c. Call the hospital operator and report a Code Pink
 - d. Call the hospital operator and report a Code Adam
32. During a Code Pink, if when questioning a person carrying a large purse, bag, jacket etc, he/she refuses a search or exhibits suspicious behavior, you should:
 - a. Detain that person
 - b. Call the hospital operator with a detailed description
 - c. Call Police Services (Downtown)/Security (Edmond) with a detailed description
 - d. Walk away
33. In neonatal and perinatal units, staff members wear unique scrubs and have pink ID badges as a heightened security measure.
 - a. True
 - b. False
34. All staff and contract staff are responsible for ensuring other do not "draft" entrance into a secure area when opening doors with badge access.
 - a. True
 - b. False

[Type here]

35. Patients at risk for falls or injury from falls will have a sign designating the risk on their door and on the front of their chart.
 - a. True
 - b. False
36. Employees are responsible for utilizing the appropriate PPE when handling hazardous materials and for reporting potential overexposures and mislabeled hazardous materials.
 - a. True
 - b. False
37. Chemicals transferred from the original container to another container for storage do not need a label.
 - a. True
 - b. False
38. Safety Data Sheets (SDS) may be obtained on the intranet or by calling a toll-free number.
 - a. True
 - b. False
39. When should a piece of equipment should be tagged and locked in the off position?
 - a. It is inoperable
 - b. It is taken out of service
 - c. Its start up could injure someone.
 - d. All of the above
40. The person in charge of the unit or Respiratory Supervisor is responsible to shut off/direct another individual to shut off the oxygen supply to that unit in the event of a disaster or fire.
 - a. True
 - b. False
41. It is acceptable to cleanse your hands with alcohol-based hand sanitizer when your hands are visibly soiled.
 - a. True
 - b. False
42. Standard Precautions, including wearing appropriate PPE, should be used
 - a. When you are concerned that the patient has a contagious disease
 - b. When you are certain a patient has a blood borne pathogen disease
 - c. In all patient care
 - d. When contamination is likely
43. Blood-borne pathogens such as HIV and Hepatitis B can only be transmitted through blood.
 - a. True
 - b. False
44. Signs of abuse and/or neglect include all of the following except:
 - a. Physical marks (bites, bruises, broken bones, lacerations)
 - b. A person telling you he/she has been abused
 - c. Crying excessively
 - d. Extreme withdrawal or agitation

[Type here]

- e. An unkempt appearance (improper clothing for the weather, extremely poor hygiene)
45. Reporting abuse or neglect is the responsibility of all staff, volunteers, students, etc.
- a. True
 - b. False
46. Utilizing population specific care guidelines to carry out their work is the responsibility of all hospital employees.
- a. True
 - b. False
47. You can access resources for cultural appropriate care by clicking on the link on the intranet page under the “Medical Reference” tab.
- a. True
 - b. False
48. Where can you locate OUM Policies and Procedures?
- a. Meditech
 - b. Atlas
 - c. Intranet – Policies & Procedures
 - d. Internet – Under Employee Resources
49. Which of the following are signs or symptoms of stroke?
- a. Sudden severe headache
 - b. Dizziness
 - c. Slurred speech
 - d. Sudden numbness on one side
 - e. All of the above
50. The Code to call if an inpatient is suspected of having had a stroke is:
- a. Code Purple
 - b. Code Green
 - c. Code Blue
 - d. Code Gray
51. According to The Joint Commission, which of the following statements regarding inappropriate abbreviations is not true:
- a. Never use u for units. Spell it out because it can be mistaken for a 4.
 - b. Never use qd, qod for daily and every other day. Write out daily or every other day.
 - c. Never use a trailing zero.
 - d. Always use standard abbreviations for drug names.
52. The committee guiding implementation of processes to prevent hospital acquired conditions has established a goal related to central line infections of:
- a. Reducing the occurrence by 25%
 - b. Reducing the occurrence by 50%
 - c. Reducing the occurrence to 0
53. Vendors may visit the unit to drop off food or pens without going through the HCIR Vendor check in process if they are only going to be in the area a short time and will not have patient contact.

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- a. True
 - b. False
54. Vendors must have a new badge printed with their name and date each day they are in the facility.
- a. True
 - b. False
55. If you are fluent in a foreign language, but have not done an official competency verification, you may translate
- a. Whatever you feel comfortable translating.
 - b. Only basic information such as location of bathrooms and treatment areas
56. Asking a patient's family member to translate is inappropriate because
- a. We cannot be assured the translation will be accurate
 - b. We may need to present information that the patient might not wish the family member to know (creating a HIPAA violation)
 - c. Both a and b are correct
57. Which patient population must sign a waiver he/she refuses interpretive services?
- a. Patients who are deaf/hearing impaired
 - b. Patients who have limited English proficiency skills
 - c. Patients who are blind/have low vision
 - d. All of the above
58. Every time an interpreter is used for conveying important information to the patient AND any time inquiries are made about interpretive services, documentation should be placed in the patient's medical record.
- a. True
 - b. False
59. An interpreter with competencies on file must be used in all of the following situations except:
- a. Determining a patient's history or description of ailment or injury
 - b. Obtaining informed consent or permission for treatment
 - c. Provision of patient's rights
 - d. Explanation of living wills or powers of attorney (or their availability)
 - e. Diagnosis or prognosis of ailments or injuries
 - f. Explanation of procedures, test, treatment, treatment options or surgery
 - g. Explaining the administration and side effects of medications, including side effects and food or drug interactions
 - h. Explaining to the patient how to use the call light
 - i. Discharge instructions or planning
 - j. Explaining and discussing advance directives
60. Look-a-like/sound alike drugs are those with names that could easily be mistaken for the other and should therefore be stored away from one another.
- a. True
 - b. False
61. The High Alert Drugs are identified as such because
- a. They have a high risk for abuse
 - b. They are associated with a high percentage of errors

[Type here]

- c. They have been involved with sentinel events
- d. All of the above

62. Staff involved in direct patient care are not allowed to wear nail extenders, artificial nails or have nails longer than ¼ inch beyond the fingertip.

- a. True
- b. False

63. A HIPAA violation can occur if you share information which can be linked back to a patient, even if you do not specifically reveal the patient's name.

- a. True
- b. False

64. It is permissible to access the medical record of a coworker's husband who is a patient, to check on his condition if you are curious.

- a. True
- b. False

65. Photographs may be taken using personal devices.

- a. True
- b. False

All photos must be taken using facility-owned devices and may not be taken using personal devices.

66. Consent to photograph/videotape patients/visitors must be obtained even if the picture does not depict the patient's face or other identifiable image.

- a. True
- b. False

67. Anytime you leave your workstation you should log off the computer

- a. True
- b. False

68. If you suspect a staff member of mistreating a patient, it is important to immediately report your concern to your chain of command or the clinical coordinator/administrator on call if it is a night/weekend shift.

- a. True
- b. False

69. In the acronym CLEAN helps us remember what to do in the case of a hazardous material spill. The "L" in CLEAN stands for:

- a. Loosely cover the spill
- b. Leave the area unless properly trained in clean up
- c. Locate the Safety Data Sheet

70. It is a requirement in our hospital that medications:

- a. are locked/secured
- b. are under constant supervision
- c. are available

71. In order to maintain the security of medications, It is important that I:

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- a. Never allow unauthorized individuals to enter into areas where medications are stored.
- b. Never leave areas where medications are stored unlocked
- c. Never share medication room combination locks with other staff
- d. All of the above.

72. I know where the fire extinguisher, evacuation routes, and oxygen shut off are in my work area.

- a. True
- b. False

73. The purpose of Introducing yourself as part of AIDET is to:

- a. Make the patient feel safe
- b. Reduce the patient's anxiety
- c. Increase quality
- d. Increase patient loyalty

74. Regarding Social Media, which of the following statements are true?

- a. Unless specifically authorized, employees may not speak on behalf of OUM.
- b. Employees may not publicly discuss patients, employees, or other stakeholders.
- c. OUM has the right to use content management tools to monitor comments or discussions about the Company, its employees, its patients and the industry posted on the Internet.
- d. Employees should have no expectation of privacy while posting information to social networking sites.
- e. All of the above.

75. Any employee, visitor, practitioner, patient and/or family member, who suspects that a practitioner is impaired, is unable to work cooperatively with others or has exhibited disruptive behavior should

- a. Immediately contact the Departmental Director
- b. Call the Ethics Hotline
- c. Submit a written report to the Chief Medical Officer
- d. Call Administration

76. If an employee has a condition or situation which might have an impact on their ability to function in their position, they should

- a. Ignore it and continue working
- b. Notify Human Resources
- c. Notify their supervisor
- d. Notify the Ethics and Compliance Officer

77. Near miss event that should be reported through RL Solutions include:

- a. Verbal or physical violence, threats of physical violence or damage to property
- b. Weapons found on a person (knives with blades over 4", guns, etc.)
- c. Intentional destruction of property
- d. Any issues that *require* police intervention
- e. All of the above