St. Luke's- Roosevelt Hospital Center

2009 Core Competency Challenge Exam

Name: _____   **Date: _____**
Position: _____   **Volunteer Department**

Directions: Select one best answer for each question.

Section I Mission Statement

1. The Mission of SLRHC includes:
     a) Providing outstanding patient care.
     b) Supporting research to further medical knowledge and practice.
     c) Providing the highest caliber of training for all healthcare employees
     d) All of the above

Section II Environment of Care

1. An employee must wear a hospital identification badge at all times while on the premises.
     a) True
     b) False

2. In the event of a Security Emergency, the number you would call at your site is:
     a) 4444
     b) 7512
     c) 1000
     d)   911 at all sites

3. The phrase used to alert staff that there is a fire in the hospital is:
     a)   Code Pink
     b)   Code Blue
     c)   Code Red
     d)   Code Green

4. In case of a fire emergency, you would **RACE**. **RACE** stands for:
     a) Rescue, Abandon, Contain, and Escape
     b) Run, Abandon, Close and Escape
     c) Rescue, Alarm, Contain, Extinguish
     d) None of the Above

5. Who can close an area's oxygen shut off valve:
     a) Engineering
     b) Respiratory Therapist
     c) Housekeeping
     d) Anyone upon being directed by the Nurse-in-charge of the floor

6. If patients need to be evacuated due to a fire emergency on your floor, you should:
     a) Evacuate all patients to the floor above your floor
     b) Use the elevator to evacuate patients
     c) Evacuate ambulatory patients last
     d) Evacuate all patients to the other side of smoke barrier doors

7. Where can you smoke at St. Luke's- Roosevelt Hospital Center:
   a) Stairwells
   b) Private Offices
   c) In the smoking lounge
   d) None of the Above

8. To use a fire extinguisher, you:
   a) RACE
   b) HVAC
   c) PASS
   d) PUSH

9. The code used to alert staff to an infant abduction is:
   a) Code I
   b) Code Blue
   c) Code Pink
   d) Code Green

10. Before using medical equipment, the following should be done:
    a) Check the inspection sticker and do not use if past inspection due date
    b) Check physical condition of the equipment and do not use if not in good condition
    c) Plug into red outlet if vital equipment
    d) All of the above

11. Which items can be safely brought into the MRI area:
    a) IV poles and pumps
    b) Respiratory and monitoring equipment
    c) Pad of paper
    d) Beeper and cell phone

12. Which of the following references would you use to obtain information about first-aid
    measures, handling and storage, and personal protective equipment for use with a chemical:
    a) Administrative Policy and Procedure Manual
    b) Infection Control Manual
    c) Departmental Policy and Procedure Manual
    d) Material Safety Data Sheets (MSDS)

13. Which type of waste should be placed in red bags:
    a) Newspapers
    b) IV bags used with chemotherapy drugs
    c) Test tubes
    d) Suction canisters containing fluid

Section III Infection Control

14. Healthcare workers can prevent the spread of infection by:
    a) Washing hands with plain soap and water or using alcohol handrub
    b) Wearing personal protective equipment when necessary
    c) Disposing of sharps properly
    d) All of the above

15. Employees with direct patient contact may wear artificial fingernails or extenders:
    a) True
    b) False

16. If you are unsure what types of precautions are needed for a patient with a transmittable illness, you can consult:
    a) Infection Control Manual
    b) Environment of Care Manual
    c) Nurse Epidemiologist
    d) a and c

Section IV Patients' Rights

17. The Patients' Bill of Rights states that each patient has the right to:
    a) Receive emergency care if you need it
    b) Complain without fear and receive a response
    c) Know the name of staff involved in care
    d) All of the above

18. Which of the following is an example of culturally competent care?
    a) Providing education materials in the patient's language
    b) Utilizing interpreter services properly
    c) Learning about the cultures you serve and using that knowledge to provide individualized care to each patient.
    d) All of the above

19. A patient who has questions about paying for hospital services should be directed to:
    a) New York City Medicaid office
    b) Department of Social Work
    c) Department of Financial Counseling
    d) Administration

20. SLRHC must provide patients with free, trained, medical interpreters to eliminate language as a barrier to quality care.
    a) True
    b) False

21. Which of the following are ways to ensure that patients understand our instructions?
    a) Use drawings or devices to demonstrate instructions
    b) Avoid using medical jargon
    c) Ask the patient to repeat back what you have just taught
    d) All of the above

22. Mandated individual reporters are now required to personally report suspected child abuse to the Statewide Central Register:
    a) True
    b) False

23. Which Advance Directive is a document in which a patient appoints a health care agent:
    a) Health Care Proxy
    b) Living Will
    c) Power of Attorney
    d) Do Not Resuscitate Order

Section V Performance Improvement/ Risk Management

24. Quality improvement activities to be monitored may be selected from:
    a) Patient safety
    b) Input from staff
    c) High volume diagnoses
    d) Any of the above

25. The ORYX Core Measure Initiative requires SLR to collect performance data on the following:
    a) Heart Failure
    b) Acute MI (Heart Attack)
    c) Community Acquired Pneumonia
    d) All of the above

26. Which of the following are examples of professional misconduct?
    a) Refusing to care for a patient because of religion or race
    b) Failing to maintain proper patient records
    c) Verbally intimidating a patient or employee
    d) All of the above

Section VI Patient Safety

27. What can an employee or physician do if he or she has a suggestion about a potential unsafe condition?
    a) Speak with his/her manager/director/chairman/Chief Medical Officer
    b) Call the Risk Management Department
    c) Call the Safety Officer
    d) Any of the above

28. Employee concerns about safety may be reported directly to the Joint Commission either by telephone or via email:
    a) True
    b) False

29. Which of the following are requirements for National Patient Safety Goal: Improve Effectiveness of Communication Among Caregivers:
    a) Prohibited abbreviations may not be used
    b) Utilize standardized approach to "hand-off" communications
    c) Use a write down/read back process for critical test results
    d) All of the above

30. Practicing good hand hygiene is one way to comply with National Patient Safety Goal: Reduce the Risk of Healthcare-Associated Infections:
    a) True
    b) False

31. When should a "Time-Out" be implemented:
    a) After starting a procedure
    b) Immediately before starting a procedure
    c) Before the physician enters the room
    d) When the majority of the team is present

32. Which of the following should be used as patient identifiers?
    a) Name and patient's room number
    b) Name and date of birth
    c) Date of birth and patient's room number
    d) Any of the above

33. Which of the following is **NOT** part of the Patient Fall Prevention Program?
    a) Patients are instructed to wear non-slip foot wear.
    b) All hospital staff are to communicate unsafe situations to charge nurse or Nurse Manager/Supervisor.
    c) Patients are assessed on admission and at regular intervals for risk of falling.
    d) Red armband is placed on wrist of patient at high risk for falling

34. Which color-coded patient alert ID band means "Limb Alert"?
    a) Red
    b) Yellow
    c) Pink
    d) Purple

Section VII Customer Service

35. The national standardized way that SLR uses to collect data on patient's satisfaction with hospital care, that is reported on the internet is:
    a) Hospital Consumer Patient Satisfaction Survey (HCPSS)
    b) Press Ganey Survey
    c) Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)
    d) St. Luke's- Roosevelt only does internal patient satisfaction surveys

36. What are some ways that we can practice good customer service?
    a) Greet patients, families and visitors with a smile
    b) Keep staff gossip and personal matters out of a patient's hearing
    c) Apologize for delays
    d) All of the above

Section VIII Population Specific Care
(for associates with patient contact)

37. Patient populations can be defined by the following:
    a) Age
    b) Cultural/spiritual
    c) Disease
    d) Any of the above

Note: See next page for Section IX: Corporate Compliance questions.

Section IX: Corporate Compliance

1. The Code of Conduct provides information and guidance relating to complying with laws and being ethical.
   a) True
   b) False

2. The Code of Conduct applies to all staff, including physicians
   a) True
   b) False

3. There are two (2) elements pertaining to the Corporate Compliance Program.
   a) True
   b) False

4. Corporate Compliance training is provided at new employee orientation.
   a) True
   b) False

5. The Office of Corporate Compliance telephone # is (212) 523-2162
   a) True
   b) False

6. If I witness someone breaking a law or committing an unethical act I should tell no one and keep it to myself.
   a) True
   b) False

7. The Corporate Compliance Hotline is available 24 hours per day, 7 days per week
   a) True
   b) False

8. Confidential information should be kept confidential
   a) True
   b) False

9. The Notice of Privacy Practices gives patients notice about the way in which their PHI can be used or shared.
   a) True
   b) False

10. PHI is information that is unique to a patient and can identify that person
    a) True
    b) False

11. Computer passwords can be shared with others
    a) True
    b) False

12. Continuum has a system for reporting HIPAA privacy issues to the Privacy Officer.
    a) True
    b) False

13. Which of the following gifts may I accept from a grateful patient in return for performing my Continuum job duties?
    a) A $100 gift certificate to Macys
    b) Two (2) box seat tickets behind home plate for a NY Yankees game
    c) A Rolex watch
    d) None of the above

14. Which of the following responsibilities must I follow?
    a) Abide by the Code of Conduct
    b) Be responsible and ethical
    c) Comply with laws and regulations
    d) All of the above

15. Which law prohibits hospital emergency departments from delaying care, refusing treatment, or transferring a patient to another hospital based on their inability to pay for services?
    a) HIPAA
    b) EMTALA
    c) Stark
    d) False Claims Act

16. Which of the following government agencies is responsible for creating corporate compliance programs?
    a) OIG
    b) DOJ
    c) CIA
    d) NSC

17. Which of the following are necessary elements of effective corporate compliance programs?
    a) Standards of conduct
    b) Open lines of communication
    c) Internal auditing and monitoring
    d) All of the above

18. Which of the following acts is **not** considered fraudulent billing?
    a) Upcoding
    b) Unbundling
    c) Submitting accurate claims for medically necessary services
    d) Duplicate billing

19. In what ways can you contribute to Continuum's Corporate Compliance Program?
    a) By asking questions
    b) By reporting actual or suspected violations of law or standards
    c) By doing your job …"One Way…the Right Way"
    d) All of the above

20. Who may I contact with questions about Corporate Compliance or HIPAA?
    a) My supervisor
    b) The Corporate Compliance Officer
    c) Both of the above