1. True or False. All BC surveys are unannounced?

Answer: False.

50% announced and 50% unannounced

- 2. Which of the following areas do surveyors observed during the initial tour?
 - A. Quality of life
 - B. Staff & resident interactions
 - C. Staff communication with residents
 - D. Activities
 - E. All of the above

Answer: E. All of the above

3. True or False. During the initial tour, when surveyors meet the residents for the first time, it is customary for facility staff to accompany the surveyor into the resident's room.

Answer: False.

If staff is present, residents may be reluctant to share specific detailed information with the surveyor related to fear of retaliation from staff.

- 4. Residents chosen for review during a survey may include which of the following:
 - A. Light care and heavy care residents
 - B. Interviewable and non-interviewable residents
 - C. New admits within the past 6 month
 - D. Residents on hospice services
 - E. All of the above

Answer: E. All of the above.

In addition residents with end-stage renal disease, residents under the age of 55, and residents w/ mental illness or mental retardation may also be selected for review during the survey.

5. True or False. If the facility doesn't identify any "interviewable" residents, then the surveyor will conduct family interviews.

Answer: True



- 6. During the survey, which factor "drives" the survey?
 - A. Facility policy/procedure
 - B. Resident interview
 - C. Staff interview
 - D. Observations of resident care & services

Answer: D. Observations of resident care & staff interaction with residents drive the survey. If an observation of resident care raises a question/concern, the surveyor will continue to make observations and follow-up during record review and staff interview to find the answers to the question(s) raised.

- 7. During Information Gathering (Task 5), surveyors conduct a review and make observations in all of the following areas **EXCEPT**:
 - A. Kitchen/Food Service
 - B. Activity Room
 - C. Medication Room
 - D. Clean/Dirty Utility Room
 - E. Staff Lounge

Answer E. The survey only takes a look at the resident's environment.

8. True or False. Employees are required to wear hair restraints when dishing up resident food.

Answer A.

- 9. Which of the following areas should be included/identified on the resident's care plan?
 - A. Goals
 - B. Problem area(s)
 - C. Interventions
 - D. Needs
 - E. All of the above

Answer E.



- 10. Which area is **NOT** looked at while reviewing a closed record?
 - A. Resident care issues
 - B. Appropriate treatment and services
 - C. Transfer and Discharge requirements
 - D. Financial
 - E. All of the above

Answer: D. The survey process does not care if the resident's payer source is private pay or Medicaid.

- 11. Can Basic Care facilities require residents to get their medications filled from the facility pharmacy that provides unit dosing for the facility?
 - A. Yes
 - B. No

Answer: B. No. Licensing Rules for Basic Care facilities (regulations) for Governing Body, page 10 states facilities must comply with ND Century Code Chapter 50-10.2. In the binder provided to each facility, under Tab 7 you will find a copy of Chapter 50-10.2 titled "Rights of Health Care Facility Residents." On page 3, letter "q" states "The right to a pharmacist of the resident's choice irrespective of the type of medication distribution system used by the facility."

- 12. Surveyors review staff training requirements for administration, dietary, activity, nursing, and direct care staff to ensure they have completed what?
 - A. Fire and accident prevention and safety
 - B. Mental and physical health needs of the residents; including behavior problems
 - C. Prevention and control of infection, including standard precautions
 - D. Resident rights.
 - F. All of the above

Answer: E. In addition, the administrator needs at least 12 continuing education hours yearly related to care & services of residents. Staff responsible for food preparation shall attend a minimum of 2 dietary educational programs yearly. Staff responsible for activities shall attend a minimum of 2 activity-related educational programs yearly. Above is found on pg 12 of Regulations under the section titled "Education programs."



- 13. All of the following information MUST be included in the written record for fire drills?
 - A. Date/time of fire drill
 - B. Duration of the drill
 - C. Names of residents & staff who participated
 - D. Brief description, including escape path utilized.
 - E. All of the above

Answer E. In addition, the written record must identify which resident(s) failed to participate in the drill and the reason for their absent. Duration of fire drills should not exceed 13 minutes. Fire drills must be conducted during all shifts (days, PMs, and night). ANNUALLY, one drill must include a total evacuation of the building.

- 14. Tier I findings are a pattern of findings that have potential for causing a negative impact or harm to residents.
 - A. True
 - B. False

Answer B. False. Tier I findings are isolated, do not have more than a minimal potential for impact and are verified as corrected while the surveyor is still on-site.

- 15. During the exit conference, the surveyor discusses/informs the facility of what?
 - A. Surveyor observations from the survey
 - B. Preliminary findings
 - C. Any Tier I findings
 - D. Any Tier II findings
 - E. All of the above

Answer E. When sharing/informing the facility of their observations, surveyors will not identify which facility staff they observed, but rather share when the observation occurred and what the observation showed.

- 16. What happens to a Tier I finding remains out of compliance at the time of the revisit?
 - A. It will remain a Tier I deficiency
 - B. It is automatically recited as Tier II deficiency which will require the facility to submit a POC
 - C. The facility is provided with a chance to correct the deficiency while the surveyors are on-site
 - D. All of the above
 - E. None of the above

Answer: B. It becomes a Tier 2 deficiency.