

1. The hospice must obtain the patient's or representative's signature confirming that he or she has received a copy of the notice of patient rights and responsibilities in a language they can understand. This can be done in the first 5 days of service.

True

False

§§418.52 (a)(1) - *During the initial assessment visit in advance of furnishing care the hospice must provide the patient or representative with verbal (meaning spoken) and written notice of the patient's rights and responsibilities in a language and manner that the patient understands.*

2. Since the patient's death is imminent anyway, the hospice is not required to give the patient advance directive information.

True

False

§§418.52(a)(2) - *The hospice must inform and distribute written information to the patient concerning its policies on advance directives, including a description of applicable State law.*

3. The hospice Interdisciplinary Group (IDG), in consultation with the individual's attending physician (if any) must complete the comprehensive assessment no later than ____ days after the election of hospice care (election of hospice benefit).

A. 4 calendar

B. 5 calendar

C. 2 working

D. 5 working

§§418.54(b) - *The hospice interdisciplinary group, in consultation with the individual's attending physician (if any), must complete the comprehensive assessment no later than 5 calendar days after the election of hospice care. . .*

4. The comprehensive assessment must include data elements that allow for measurement of outcomes.

True

False

§§418.54(e)(1) - *The comprehensive assessment must include data elements that allow for measurement of outcomes. . .*

5. The comprehensive data elements are measured and documented in different ways for patients depending on the patient's diagnoses.

True

False

§§418.54(e)(1) - *. . .The hospice must measure and document data in the same way for all patients. The data elements must take into consideration aspects of care related to hospice and palliation.*

6. The comprehensive assessment contains the following 4 elements:

A. Physical, psychosocial, emotional, and spiritual

B. Psychosocial, emotional, need for therapy, and spiritual

C. Physical, psychosocial, spiritual, and mental

§§418.54(c) - *The comprehensive assessment must identify the **physical, psychosocial, emotional, and spiritual** needs related to the terminal illness that must be addressed in order to promote the hospice patient's well-being, comfort, and dignity throughout the dying process.*

7. The plan of care must be reviewed as frequently as the patient's condition requires, but no less frequently than every _____ calendar days.

A. 7

B. 15

C. 14

D. 30

§§418.54(d) - *The update of the comprehensive assessment. . . must include information on the patient's progress toward desired outcomes, as well as a reassessment of the patient's response to care. The assessment update must be accomplished as frequently as the condition of the patient requires, but **no less frequently than every 15 days.***

8. Since the hospice is required to have a medical director, it isn't necessary to consult with the patient's attending physician.

True

False

§§418.54(d) - *The update of the comprehensive assessment must be accomplished by the hospice interdisciplinary group (in collaboration with the individual's attending physician, if any) and must consider changes that have taken place since the initial assessment. . .*

9. Over-the-counter drugs should be included in the patient's drug profile, but it is not necessary to include herbal remedies the patient uses.

True

False

§§418.54(c)(6) - *Drug profile. A review of all of the patient's prescription and **over-the-counter drugs, herbal remedies, and other alternative treatments** that could affect drug therapy. This includes, but is not limited to, identification of the following: effectiveness of drug therapy; drug side effects; actual or potential drug interactions; duplicate drug therapy; drug therapy currently associated with laboratory monitoring.*

10. The initial bereavement assessment must be performed within the first 30 days of service.

True

False

§§418.54(c)(7) - *§§418.54(c) identifies the required elements of the comprehensive assessment which is due within 5 days of the patient's election of hospice benefits. §§418.54(c)(7) - An initial bereavement assessment of the needs of the patient's family and other individuals focusing on the social, spiritual, and cultural factors that may impact their ability to cope with the patient's death. Information gathered from the initial bereavement assessment must be incorporated into the plan of care and considered in the bereavement plan of care.*

11. The frequency and detail of the QAPI data collection must be approved by the hospice's _____.

A. Governing body

- B. Medical director
C. Quality Improvement Committee
D. Performance Improvement Coordinator

§§418.58(b)(3) - *The frequency and detail of the data collection must be approved by the hospice's governing body.*

12. A registered nurse must make an onsite visit to the patient's home no less frequently than every 14 days to assess the quality of care and services provided by the hospice aide and to ensure that the aide services ordered by the hospice IDG meet the patient's needs.

A. The hospice aide does not need to be present during this visit

- B. The hospice aide needs to be present during the supervisory visit

§§418.76(h)(1)(i) - *A registered nurse must make an on-site visit to the patient's home: No less frequently than every 14 days to assess the quality of care and services provided by the hospice aide and to ensure that services ordered by the hospice interdisciplinary group meet the patient's needs. The hospice aide does not have to be present during this visit.*

13. All entries must be legible, clear, complete and appropriately authenticated and dated in accordance with hospice policy and currently accepted standards of practice.

True

False

§§418.104(b) - *All entries must be legible, clear, complete, and appropriately authenticated and dated in accordance with hospice policy and currently accepted standards of practice.*

14. The hospice must assume responsibility for professional management of the patient's hospice services provided, in accordance with the hospice plan of care and the hospice conditions of participation, and make any arrangements necessary for hospice-related inpatient care. Examples of professional management include:
- A. Assessing, planning and monitoring
 - B. Directing and evaluating the patient across all settings
 - C. All of the above**
 - D. None of the above

§§418.112(b) - *The hospice must assume responsibility for professional management of the resident's hospice services provided, in accordance with the hospice plan of care and the hospice conditions of participation, and make any arrangements necessary for hospice-related inpatient care. . .*

Interpretive Guidelines §§418.112(b) - *Professional management involves assessing, planning, monitoring, directing and evaluating the patient's hospice care across all settings.*

15. Counseling (spiritual, dietary, bereavement) services may be provided by contract personnel.

True

False

§§418.64 - *A hospice must routinely provide substantially all core services directly by hospice employees. These services must be provided in a manner consistent with acceptable standards of practice. These services include nursing services, medical social services, and counseling. The hospice may contract for physician services. . .*

16. Background checks must be conducted for which of the following groups:

- A. Everyone who provides personal care to the patient
- B. Only nurses and aides
- C. Employees who have direct patient contact or access to patient records
- D. Everyone who has direct patient contact or access to patient records, including contract personnel**

§§418.114(d)(1) - *The hospice must obtain a criminal background check on all hospice employees who have direct patient contact or access to patient records. Hospice contracts must require that all contracted entities obtain criminal background checks on contracted employees who have direct patient contact or access to patient records.*

17. If a patient requires inpatient care for respite purposes, the inpatient facility has responsibility for ensuring that the inpatient facility personnel have been properly trained in the hospice philosophy.

True

False

§§418.112(f) - *Hospice staff must assure the orientation of SNF/NF or ICF/MR staff furnishing care to the hospice patients in the hospice philosophy, including hospice policies and procedures regarding methods of comfort, pain control, symptom management, as well as principles about death and dying, individual responses to death, patient rights, appropriate forms, and record keeping requirements.*

18. Hospices may accept physicians' rubber stamp signatures.

True

False

CMS S&C-08-22 dated May 30, 2008, "*Hospices may not accept physicians' rubber stamp signatures for their clinical record documentation.*"

19. Dietary counseling must be provided by a certified dietician.

True

False

§§418.64(d)(2) - *Dietary counseling, when identified in the plan of care, must be performed by a qualified individual, which include dietitians as well as nurses or other individuals who are able to address and assure that the dietary needs of the patient are met.*

20. Inpatient facilities contracted by a hospice must provide 24-hour nursing services.

True

False

§§418.110(b) - *The hospice facility must provide 24-hour nursing services that meet the nursing needs of all patients and are furnished in accordance with each patient's plan of care.*

21. Bereavement counseling begins immediately following a patient's death.

True

False

§§418.54 (c)(7) - *A bereavement assessment is part of the comprehensive assessment, which must be completed within 5 days of the patient's election of hospice benefits. Bereavement services may be offered prior to the death when the initial assessment, comprehensive assessment, or updates to the assessment identify the need for the patient/family.*

22. Bereavement counseling must be provided by a social worker.

True

False

§§418.64(d)(1) - *The hospice must have an organized program for the provision of bereavement services furnished under the supervision of a qualified professional with experience or education in grief or loss counseling.*

23. The Medicare hospice benefit is intended to primarily be a caregiver benefit.

True

False

Page 32095 Federal Register/Volume 73, No. 109/Thursday, June 5, 2008 Rules and Regulations - *The Medicare hospice benefit is not meant to be a caregiver benefit and should not be expected to function as such.*

24. Hospice core services include the following:

A. Physician services, nursing services, aide services

B. Physician services, nursing services, medical social services, and counseling services (dietary, bereavement, spiritual)

C. Physician services, nursing services, therapy services

§§418.64 **Core Services** - *A hospice must routinely provide substantially all core services. . . [which] include nursing services, medical social services and counseling. The hospice may contract for physician services.*

25. The only core service that may be contracted is:

A. Nursing services

B. Physician services

C. Medical social services

D. Counseling services (dietary, bereavement, spiritual)

§§418.64 - *A hospice must routinely provide substantially all core services directly by hospice employees. The hospice may contract for physician services.*

26. A hospice patient's initial assessment may be completed by either a nurse or a social worker.

True

False

§§418.54(a) - *The hospice registered nurse must complete an initial assessment . . .*

27. The initial assessment must be completed within:

- A. 12 hours
- B. 24 hours
- C. 36 hours

D. 48 hours

§§418.54(a) - *The hospice registered nurse must complete an **initial assessment within 48 hours** after the election of hospice care unless the physician, patient or representative requests that the initial assessment be completed in less than 48 hours.*

28. The Interdisciplinary Group must include, but is not limited to, the following members:

A. Physician, RN, social work, pastoral or other counselor

- B. Physician, RN, social work, aide
- C. RN, social work, pastoral or other counselor
- D. Physician, RN, social work, therapist

§§418.56(a)(1)(i)-(iv) *The interdisciplinary group must include, but is not limited to, individuals who are qualified and competent to practice in the following professional roles: a **doctor of medicine or osteopathy** (who is an employee or under contract with the hospice); a **registered nurse**; a **social worker**; a **pastoral or other counselor**.*

29. The hospice must maintain and document an effective infection control program that protects the following:

- A. Patients, families and visitors
- B. Patients and their families

C. Patients, families, visitors and hospice personnel

§§418.60 - *The hospice must maintain and document an effective **infection control program that protects patients, families, visitors and hospice personnel** by preventing and controlling infections and communicable diseases.*

30. The hospice must provide for an ongoing sharing of information with other non-hospice healthcare providers furnishing services unrelated to the terminal illness and related conditions.

True

False

§§418.56(e)(5) - *The hospice must develop and maintain a system of communication and integration in accordance with the hospice's own policies and procedures, to . . . provide for an ongoing sharing of information with other non-hospice healthcare providers furnishing services unrelated to the terminal illness and related conditions.*

31. The main purpose of the new QAPI program is:

A. To set a clear expectation that hospices will drive their own quality improvement programs and improve their provision of services.

B. To teach hospices that the government is in control.

C. To punish hospices for their bad behavior.

§§418.58 Interpretive Guidelines - *The fundamental purpose of the QAPI CoP is to set a clear expectation that hospices must take a proactive approach to improve their performance, and focus on improved patient/family care and activities that impact patient health and safety.*

32. Hospices are not required to begin Performance Improvement Projects until February 2, 2010.

True

False

§§418.58(d) - *Beginning February 2, 2009, hospices must develop, implement and evaluate performance improvement projects*

33. The hospice's infection control program is only applicable for patients in inpatient settings.

True

False

§§418.60 Interpretive Guidelines - *The hospice infection control program must identify risks for the acquisition and transmission of infectious agents in all settings where patients reside. There needs to be a system to communicate with all hospice personnel, patients, families and visitors about infection prevention and control issues including their role in preventing the spread of infections and communicable diseases through daily activities.*

34. CMS establishes a minimum number of Performance Improvement Projects a hospice must implement.

True

False

§§418.58(d)(1) - *The number and scope of distinct performance improvement projects conducted annually, based on the needs of the hospice's population and internal organizational needs, must reflect the scope, complexity, and past performance of the hospice's services and operations.*

35. Advance practice nurses may never treat hospice patients.

True

False

§§418.64(b)(2) - *If State law permits registered nurses (including nurse practitioners) to see, treat and write orders for patients, then registered nurses may provide services to beneficiaries receiving hospice care.*

36. Highly specialized nursing services that are provided so infrequently that the provision of such services by direct hospice employees would be impracticable and prohibitively expensive may be provided under contract.

True

False

§§418.64(b)(3) - *Highly specialized nursing services that are provided so infrequently that the provision of such services by direct hospice employees would be impracticable and prohibitively expensive, may be provided under contract.*

37. Counseling services includes the following:

A. Bereavement, dietary, spiritual

B. Bereavement, marital, dietary

C. Dietary, spiritual, family

§§418.64(d) *Counseling services must be available to the patient and family to assist the patient and family in minimizing the stress and problems that arise from their terminal illness, related conditions, and the dying process. Counseling services must include, but are not limited to, the following: (1) bereavement counseling; (2) dietary counseling; (3) spiritual counseling.*

38. Hospices located in a non-urbanized area may submit a written request for a waiver of the requirement for providing physical therapy, occupational therapy, speech-language pathology, and dietary counseling services.

True

False

§§418.74 - *Waiver of requirement - physical therapy, occupational therapy, speech-language pathology, and dietary counseling - A hospice located in a non-urbanized area may submit a written request for a waiver of the requirement for providing physical therapy, occupational therapy, speech-language pathology, and dietary services. The hospice may seek a waiver of the requirement that it make physical therapy, occupational therapy, speech-language pathology, and dietary counseling services (as needed) available on a 24-hour basis. §§418.74 Interpretive guidelines - This waiver does not waive the hospice's responsibility to provide PT, OT, SLP, and dietary counseling; only to provide them (as needed) on a 24-hour basis.*

39. Homemakers may perform all hospice aide duties.

True

False

§§418.76(j) - *Only if the homemaker is a qualified hospice aide §§418.76(j)*

40. Hospice aides must receive _____ hours of in-service training during a 12-month period.

A. 8

B. 10

C. 12

D. 16

§§418.76(d) - *In-service training - A hospice aide must receive at least 12 hours of in-service training during each 12-month period.*

41. Hospice aides may be supervised by either a registered nurse or a licensed practical nurse.

True

False

§§418.76(h) - *Supervision of hospice aides - A **registered nurse** must make an on-site visit to the patient's home no less frequently than every 14 days to assess the quality of care and services by the hospice aide and to ensure that services ordered by the hospice interdisciplinary group meet the patient's needs. The hospice aide does not have to be present during this visit.*

42. The RN must provide an on-site visit to watch the aide perform care at what frequency:

A. Every 14 days

B. Every 30 days

C. Quarterly

D. Annually

§§418.76(h)(2) - *A **registered nurse** must make an annual on-site visit to the location where a patient is receiving care in order to observe and assess each aide while he or she is performing care*

43. If an area of concern about an aide's competence is verified by the hospice during an on-site visit, then the hospice must conduct, and the hospice aide must complete, another competency evaluation.

True

False

§§418.76(h)(iii) - *If an area of concern is verified by the hospice aide during an on-site visit, then the hospice must conduct, and the hospice aide must complete, a competency evaluation in accordance with §§418.76(c).*

44. The hospice aide may be used as a homemaker.

True

False

§§418.76(j) - *A qualified homemaker is. . . A hospice aide as described in §§418.76.*

45. The physical therapist may supervise the hospice aide.

True

False

§§418.76(h) - *Supervision of hospice aides - A registered nurse must make an on-site visit to the patient's home no less frequently than every 14 days to assess the quality of care and services provided by the hospice aide and to ensure that services ordered by the hospice interdisciplinary group meet the patient's needs.*

46. Clergy duties may be performed by a volunteer.

True

False

§§418.78(b) - *Volunteers must be used in day-to-day administrative and/or direct patient care roles.*