

## POST-TEST

**Instructions:** Please use the *answer sheet* provided at the end of the post-test to mark your correct answers.

1. Administrative law deals with
  - a. Malpractice suits
  - b. Criminal prosecution against professionals
  - c. Licensing board actions
  - d. None of the above
2. Licensing boards are created by the \_\_\_\_\_ in order to \_\_\_\_\_.
  - a. Congress; serve the executive
  - b. County Supervisors; serve the attorney general
  - c. Attorney General; serve the county supervisors
  - d. State legislature; protect the public
3. The “playing field” for professionals facing licensing board actions is not level, in that:
  - a. Professionals have no subpoena power
  - b. Professionals have no deposition power
  - c. Administrative Law Judges can only make recommendations to licensing boards
  - d. All of the above
4. Licensing boards rely on the following in order to make disciplinary decisions:
  - a. Board experts
  - b. National professional society ethics codes
  - c. Statutes and regulations
  - d. All of the above
5. Problems with malpractice cases as a regulatory mechanism include:
  - a. Most such cases are settled out of court
  - b. Professionals don’t often learn about cases that are adjudicated
  - c. Both of the above
  - d. Neither of the above
6. Core knowledge for all mental health professionals includes:
  - a. Ethics codes
  - b. Autonomy & beneficence
  - c. Informed consent
  - d. All of the above
7. Informed consent has its origins in:
  - a. Case law in physical medicine
  - b. Case law in mental health
  - c. Licensing board actions
  - d. None of the above
8. Informed consent:
  - a. Should be completed in the first session
  - b. May arise at any time over the course of treatment
  - c. Cannot be properly obtained in the first session
  - d. All of the above

9. Informed consent:
  - a. Is problematic with “non-linear” intervention situations
  - b. Is relatively simple to obtain
  - c. Does not require patient competence
  - d. None of the above
10. Physical contact or touching between clinician and patient is:
  - a. Forbidden by all mental health professional society ethics codes
  - b. Encouraged by all mental health professional society ethics codes
  - c. Up to the individual clinician
  - d. None of the above
11. An example of failure to provide informed consent is:
  - a. Ending a session early due to illness
  - b. Accepting an emergency phone call from a family member during a session
  - c. Custody recommendations by treating clinicians
  - d. All of the above.
12. Having patients bring significant others to sessions:
  - a. Can be an important part of treatment
  - b. Can expose clinicians to liability
  - c. Should be dealt with via informed consent
  - d. All of the above
13. The requirement for keeping professional records:
  - a. Applies to all mental health professionals
  - b. Doesn't apply to psychoanalysts
  - c. Doesn't apply to professionals who don't bill insurance
  - d. All of the above
14. Professional records can be modified:
  - a. If necessary
  - b. In case of litigation
  - c. If the modifications and the original records are both shown
  - d. By computer experts
15. When amending a record pursuant to a patient request:
  - a. The professional should provide a thorough explanation for the change
  - b. The professional can discard the original record
  - c. The explanation for the change should be minimal
  - d. None of the above
16. Process notes are:
  - a. The preferred way of keeping records
  - b. Fraught with legal dangers
  - c. Safe from subpoenas
  - d. None of the above
17. The clinical record consists of:
  - a. Any information that might appear on an insurance form
  - b. Psychoactive medications
  - c. Treatment summaries
  - d. All of the above

18. Patients who wish to see their records must be accommodated within:
  - a. Five working days
  - b. Ten working days
  - c. Fifteen working days
  - d. Thirty working days
19. Professionals who refuse to provide access to records on patient request:
  - a. May provide a treatment summary
  - b. May face a lawsuit
  - c. Both of the above
  - d. Neither of the above
20. The controversy about process vs. progress notes has been resolved by recommending:
  - a. That all clinicians keep both process and progress notes
  - b. That all clinicians keep only process notes
  - c. That there is no controversy here at all
  - d. None of the above
21. According to HIPAA, professionals must:
  - a. Make privacy notices available by email to patients who request them
  - b. Keep a clinical record, but not psychotherapy notes
  - c. Separate the clinical record from the psychotherapy notes
  - d. All of the above
22. Professional records must be retained:
  - a. Seven years, for agencies only
  - b. Fifteen years for all private clinicians
  - c. There is no stated regulation for private clinicians
  - d. Two of the above
23. The general trend in the field these days is to write notes that are:
  - a. So lengthy that they are almost verbatim recordings of sessions
  - b. Of moderate length, so the reader can get the full gist of what happened
  - c. Minimalist, such that only the essentials of the sessions are covered
  - d. None of the above
24. Diagnoses:
  - a. Are considered a part of the Clinical Record
  - b. Are rarely entered into the Clinical Record
  - c. Are never entered into the Clinical Record
  - d. None of the above
25. Privilege refers to:
  - a. A patient's inalienable right to take bathroom breaks as needed
  - b. A patient's fundamental right to disagree with a therapist
  - c. The right to bar confidential information from becoming evidence in legal proceedings
  - d. None of the above

26. Termination of a treatment relationship:
- Is best initiated by the patient
  - Is always initiated by the professional
  - Both of the above
  - Neither of the above
27. Abandonment of a patient:
- Can expose a clinician to legal liability
  - May include abrupt termination
  - May include retaliation by a clinician against a patient
  - All of the above.
28. Termination should include:
- Only one referral
  - A referral to a clinician who is willing/able to see the patient
  - At least four referrals
  - None of the above
29. When choosing a clinician to whom a referral of a difficult patient is made:
- Anyone willing to see the patient is fine
  - The referring clinician should check the malpractice history of the new clinician
  - The referring clinician should check for a history of Board discipline
  - None of the above
30. Termination can occur when a patient is in crisis as long as:
- The patient is always in crisis
  - The patient has successfully worked through crises before
  - The referring clinician participates in conjoint sessions with the new clinician
  - All of the above
31. Prior to terminating a patient:
- The clinician should indicate what behaviors need to change to avert termination
  - The clinician should ask the patient to take responsibility for the termination
  - The clinician should remove any responsibility from the patient
  - None of the above
32. When consider terminating a patient, it is very important to:
- Warn other clinicians in one's office or agency of the impending termination
  - Find referrals out of the immediate professional community
  - Seek consultation from a senior colleague
  - None of the above.
33. If a patient being terminated refuses to see any other clinician:
- The referring clinician has no choice but to continue services
  - The referring clinician can proceed with termination
  - The referring clinician can get a restraining order against the patient
  - None of the above

34. Children in Family Court disputes:
- a. Hold their own privilege
  - b. Should have their parents assert/waive their privilege
  - c. Are not protected by privilege at all
  - d. Have little clarity about who holds their privilege
35. *In Re: Daniel C.H.* stands for:
- a. All children in California can assert privilege
  - b. No children in California can assert privilege
  - c. Daniel could assert privilege
  - d. All of the above
36. *In Re: Kristine W.* stands for:
- a. Kristine W. could assert privilege
  - b. Privilege is not absolute
  - c. Privilege is absolute
  - d. Two of the above

# ANSWER SHEET

Please mark all of your answers from the post-test on this answer sheet.

1	13	25
2	14	26
3	15	27
4	16	28
5	17	29
6	18	30
7	19	31
8	20	32
9	21	33
10	22	34
11	23	35
12	24	36

**Certification Statement:** *(No credit will be awarded without this signed certification)*

I hereby certify that I have completed *Compassion's Boundaries*. I also hereby certify that the work presented on these answer sheets is my own and that I received no assistance in completing this test.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please Print Name:** \_\_\_\_\_