

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: _____