

CHAPTER ONE

Objective #1: List four benefits of working in the health care industry.

Question #1

List four benefits of working in the health care industry.

Correct answer: excellent employment opportunities both now and in the future, diverse array of places to work, flexible work schedules, abundance of opportunities for career advancement, the opportunity to improve the quality of other people's lives, and valuable benefits such as health and life insurance, paid vacation time and holidays, tuition assistance, and a retirement plan

Rationale: see page 3 in the text.

Question #2

Which of the following are benefits of working in the health care industry?

- A. Excellent employment opportunities
- B. Diverse array of places to work
- C. Flexible work schedules
- D. Abundance of opportunities for career advancement
- E. Opportunity to improve the quality of other people's lives
- F. All of the above

Correct answer: F

Rationale: see page 3 in the text.

Question #3

True or False. The benefits of working in the health care industry often include health and life insurance, paid vacation time and holidays, tuition assistance, and a retirement plan.

Correct answer: True

Rationale: see page 3 in the text.

Objective #2: Define *soft skills* and *hard skills*, explain the difference, and discuss why both are important.

Question #1

Define *soft skills* and *hard skills*, explain the difference, and discuss why both are important.

Correct answer: Soft skills or people skills are the personality characteristics that enhance your ability to interact effectively with other people. Soft skills relate more to *who you are* than *what you know*. Hard skills are the hands-on, technical skills that enable you to perform the duties of your job competently and safely. Hard skills can be learned and improved over time, but soft skills are part of your personality and much more difficult to acquire and change. Soft skills enhance your relationships, job performance, and career prospects.

Rationale: see page 4 in the text.

Question #2

What are soft skills?

Correct answer: Soft skills or people skills are the personality characteristics that enhance your ability to interact effectively with other people. Soft skills relate more to *who you are* than *what you know*. Since soft skills are part of your personality, they are more difficult to acquire and change than your hard skills. Soft skills enhance your relationships, job performance, and career prospects.

Rationale: see page 4 in the text.

Question #3

What are hard skills?

Correct answer: Hard skills are the hands-on, technical skills that enable you to perform the duties of your job competently and safely. Hard skills are learned and can be improved over time.

Rationale: see page 4 in the text.

Question #4

Which of the following factors relate to soft skills?

A. Sincerity

- B. Friendliness
- C. Respectfulness
- D. Compassion
- E. All of the above
- F. None of the above

Correct answer: E

Rationale: see page 4 in the text.

Objective #3: List two reasons why it's important for health care professionals to know about current trends and issues in the health care industry.

Question #1

List two reasons why it's important for health care professionals to know about current trends and issues in the health care industry.

Correct answer: Everyone is affected by the health care industry and needs to be actively involved in making improvements. If you want to be viewed as a health care professional, you need to know enough about health care trends and issues to discuss them intelligently with other people. You need to be aware of the potential impact on your job, your patients, your personal health, and your career.

Rationale: see page 5 in the text.

Question #2

True or False. Health care professionals need to know about current trends and issues in the health care industry so they can anticipate the potential impact on their jobs, patients, personal health, and careers.

Correct answer: True

Rationale: see page 5 in the text.

Objective #4: List three reasons why health care is expensive and the cost continues to rise.

Question #1

List three reasons why health care is expensive and the cost continues to rise.

Correct answer: the need to recruit, pay, and retain highly competent doctors and health professionals; medical research to develop new drugs, devices, and medical procedures; rising cost of medical equipment, supplies, and utilities; building construction, remodeling, and maintenance; and the expense of training future doctors, nurses, and other health professionals

Rationale: see page 7 in the text.

Question #2

Which of the following are reasons why health care is expensive and the cost continues to rise?

- A. The need to recruit, pay, and retain highly competent doctors and health professionals
- B. Medical research to develop new drugs, devices, and medical procedures
- C. The rising cost of medical equipment, supplies, and utilities
- D. Building construction, remodeling, and maintenance
- E. The expense of training future doctors, nurses, and other health professionals
- F. All of the above

Correct answer: F

Rationale: see page 7 in the text.

Question #3

Which of the following are reasons why health care is expensive and the cost continues to rise?

- A. Wages are much higher than in other industries
- B. Money is wasted on medical research
- C. Patients expect the best care available
- D. The expense of training future doctors, nurses, and other health professionals
- E. All of the above
- F. None of the above

Correct answers: C and D

Rationale: see page 7 in the text.

Objective #5: Identify four ways that the baby boomer population will impact the health care industry.

Question #1

Identify four ways that the baby boomer population will impact the health care industry.

Correct answer: This large segment of the population will age, live longer than their predecessors, and consume far more medical services than any elderly population in the past. By the year 2030, 6 out of 10 seniors will have at least one chronic condition, 1 out of 3 will be considered obese, 1 out of 4 will have diabetes, and 1 out of 2 will be living with arthritis. Four out of 10 adult visits to doctors' offices will be baby boomers, 55 million lab tests per year will be needed for diabetic seniors, 8 times more knee replacements will be performed than today, and 4 million more emergency department visits will be logged than today. Since more than 25% of the total health care spending for each patient occurs in the final years of his or her life, the baby boomers' consumption of health care services will continue to increase costs.

Rationale: see page 9 in the text.

Question #2

Which of the following are examples of how the baby boomer population will impact the health care industry?

- A. They will consume far more medical services than any elderly population in the past
- B. 6 out of 10 will have at least one chronic condition
- C. 1 out of 3 will be considered obese
- D. 1 out of 4 will have diabetes
- E. 1 out of 2 will be living with arthritis
- F. All of the above
- G. None of the above

Correct answer: F

Rationale: see page 9 in the text.

Question #3

Which of the following are examples of how the baby boomer population will impact the health care industry?

- A. Almost half of all adult doctors' office visits will be baby boomers
- B. Diabetic seniors will need 55 million lab tests per year
- C. Emergency departments will have 4 million more visits each year
- D. All of the above
- E. None of the above

Correct answer: D

Rationale: see page 9 in the text.

Objective #6: Identify and discuss two controversial issues associated with health care reform.

Question #1

Identify and discuss two controversial issues associated with health care reform.

Correct answer: Eligibility: Should people who already have medical problems be eligible for health insurance? Dependents: What is the maximum age that children can be covered on their parent's insurance policy? Prevention: Should insurance companies be required to cover preventive services and, if so, which ones? Benefit limitations: What limits should be placed on annual and lifetime insurance benefits? Cancellation: Under what conditions should an insurance company be allowed to cancel a policy? Waiting period: How long should a person have to wait for new health insurance coverage to take effect? What role, if any, should the government play in health care and health care reform? Should taxpayers cover the cost of health care for people who can't afford it? What changes, if any, should be made to Medicare and Medicaid to reduce the cost to taxpayers? Should people be required to have health insurance or pay a penalty if they don't want the insurance, believe they don't need it, or can't afford it? Should employers have to provide health insurance for their employees or pay a penalty?

Rationale: see page 11 in the text.

Question #2

Which of the following are controversial issues associated with health care reform?

- A. Should people who already have medical problems be eligible for health insurance?

- B. Should insurance companies be required to cover preventive services and, if so, which ones?
- C. Under what conditions should an insurance company be allowed to cancel a policy?
- D. What role, if any, should the government play in health care and health care reform?
- E. All of the above
- F. None of the above

Correct answer: E

Rationale: see page 11 in the text.

Question #3

Which of the following are controversial issues associated with health care reform?

- A. Should taxpayers cover the cost of health care for people who can't afford it?
- B. What changes, if any, should be made to Medicare and Medicaid to reduce the cost to taxpayers?
- C. Should people be required to have health insurance or pay a penalty if they don't want the insurance, believe they don't need it, or can't afford it?
- D. Should employers have to provide health insurance for their employees or pay a penalty?
- E. All of the above
- F. None of the above

Correct answer: E

Rationale: see page 11 in the text.

Objective #7: Define *continuous quality improvement* and list two quality improvement goals.

Question #1

Define *continuous quality improvement* and list two quality improvement goals.

Correct answer: Continuous quality improvement is using methods and tools to identify, prevent, and reduce the impact of process failures. Goals include: finding better ways to do things,

analyzing mistakes and errors to prevent them from happening again, eliminating adverse effects such as patient falls and bed sores, avoiding costly hospital readmissions, preventing undesirable patient outcomes such as hospital-acquired infections or medication overdoses, and reducing waste and unnecessary expense, such as duplicating blood tests or keeping patients in the hospital longer than necessary.

Rationale: see page 13 in the text.

Question #2

Continuous quality improvement involves:

- A. using methods and tools to identify, prevent, and reduce the impact of process failures.
- B. reducing and eliminating waste.
- C. duplicating blood tests when possible.
- D. decreasing rates of hospital-acquired infections.
- E. all of the above.
- F. none of the above.

Correct answers: A, B, and D

Rationale: see page 13 in the text.

Question #3

True or False. Preventing undesirable patient outcomes is a primary goal of continuous quality improvement.

Correct answer: True

Rationale: see page 14 in the text.

Objective #8: Define *sentinel event* and explain the connection between sentinel events and patient safety.

Question #1

Define *sentinel event* and explain the connection between sentinel events and patient safety.

Correct answer: A sentinel event is an unexpected occurrence involving death or serious physical or psychological injury, or the risk thereof, with “serious injuries” including the loss of a limb or function. Preventing a sentinel event is a primary goal of patient safety.

Rationale: see page 16 in the text.

Question #2

What is a sentinel event?

- A. A milestone that occurs when a health care organization has been in business for 50 years
- B. When a discharged patient has to be readmitted to the hospital
- C. When a patient who was expected to survive an illness does not
- D. A severe injury requiring treatment in an emergency department
- E. All of the above
- F. None of the above

Correct answer: F

Rationale: see page 16 in the text.

Question #3

True or False. When a patient who was expected to survive surgery does not, a sentinel event has occurred.

Correct answer: False

Rationale: see page 16 in the text.

Objective #9: Identify two trends in the supply and demand of health care workers.

Question #1

Identify two trends in the supply and demand of health care workers.

Correct answer: About 55% of RNs plan to retire in the next 10 years. By 2020 there will be a shortage of 1 million nurses in the United States. While 50% of nurses currently work in hospitals, the demand in other care settings is growing. The number of new RNs graduating from college is not sufficient to replace all of the retiring nurses. To meet the demand, new nursing graduates would have to increase by 90% a year. As the demand for RNs increases world-wide, there will be fewer foreign-trained nurses to work in the United States. Labor shortages are also predicted for other types of health care professionals, including doctors. About 40% of U.S. doctors are 55 or older. By 2020, there will be at least 100,000 fewer doctors in the workplace than today. There's already a shortage of geriatric doctors and the supply is declining. Even if the number stabilizes, there will be a shortage of 20,000 geriatricians by 2015.

Rationale: see page 17 in the text.

Question #2

Which of the following are trends in the supply and demand of registered nurses?

- A. About 55% of RNs plan to retire in the next 10 years.
- B. By 2020 there will be a shortage of 1 million nurses in the United States.
- C. There are enough new RNs graduating from college to replace all of the retiring RNs.
- D. As the demand for RNs declines world-wide, there will be more foreign-trained nurses to work in the United States.
- E. All of the above.
- F. None of the above.

Correct answers: A and B

Rationale: see page 17 in the text.

Question #3

Which of the following are trends in the supply and demand of doctors?

- A. Labor shortages are predicted for doctors in the coming years.
- B. About 85% of U.S. doctors are 55 or older.
- C. By 2020, there will be at least 100,000 fewer doctors in the workplace than today.
- D. There is already an oversupply of geriatric doctors.
- E. All of the above.
- F. None of the above.

Correct answers: A and C

Rationale: see page 17 in the text.

Objective #10: List two advantages and disadvantages of electronic medical records.

Question #1

List two advantages and disadvantages of electronic medical records.

Correct answer:

Advantages include: Patient information can be shared quickly and frequently among providers at several different locations. When providers can access comprehensive, up-to-date information on each patient, the quality and continuity of care increases and the cost associated with unnecessary duplication of blood tests and radiographs, for example, decreases. EMRs save paper and space. They enhance coordination of care since all members of the patient's health care team, regardless of their locations, have access to the same medical information. EMRs improve quality, by reducing incompatibility of prescription drugs, for example. Since technology allows immediate access to records, EMRs reduce delays so that tests and treatments can begin much sooner. They ensure legibility and reduce concerns relating to hand-written doctors' orders and treatment notes that can be difficult to read.

Disadvantages include: Training takes time and can cause a backlog in patient care until the staff is up-to-speed with the new technology. Some people, especially older workers, may resist having to learn new skills, and this can lead to anxiety and frustration. System incompatibility: There is no universal EMR and the different systems won't interact with one another. Security concerns-: Having medical information stored on computers raises concerns about potential hackers and the accidental release of private information. When storing, transmitting, and transporting medical records electronically, strict security measures must be followed to avoid a breach in confidentiality.

Rationale: see page 19 in the text.

Question #2

Which of the following are advantages of electronic medical records?

- A. Costs associated with unnecessary duplication of tests increase
- B. Patient information can be shared quickly and frequently among providers
- C. Quality, continuity, and coordination of care increases
- D. All of the above
- E. None of the above

Correct answers: B and C

Rationale: see page 19 in the text.

Question #3

Which of the following are disadvantages of electronic medical records?

- A. The amount of time required to train employees and doctors
- B. Storing records on computers requires more space than paper records
- C. Not all EMR systems will interact with one another
- D. Patient confidentiality could be breached
- E. All of the above
- F. None of the above

Correct answers: A, C, and D

Rationale: see page 19 in the text.

ADDITIONAL QUESTIONS

Question #1

True or False. Health care employs about 10% of all American workers.

Correct answer: True

Rationale: see page 3 in the text.

Question #2

True or False. During the recent economic recession, health care jobs decreased by 8%.

Correct answer: False

Rationale: see page 3 in the text.

Question #3

What is the difference between an *acute* and a *chronic* condition?

Correct answer: Acute conditions are severe but over a short period of time; chronic conditions occur frequently over a long period of time.

Rationale: see page 3 in the text.

Question #4

True or False. Just about everyone has an opinion about the health care industry: what is wrong with it and how to fix it.

Correct answer: True

Rationale: see page 5 in the text.

Question #5

Medicare is:

- A. health care primarily for people 65 and older.
- B. health care for low-income people and families.
- C. private health insurance for poor children.
- D. none of the above.

Correct answer: A

Rationale: see page 7 in the text.

Question #6

True or False. Flu shots, vaccinations, and health screenings are examples of preventive health care services.

Correct answer: True

Rationale: see page 8 in the text.

Question #7

A gatekeeper is someone who:

- A. monitors the cost of medical research.
- B. decides which patient claims get paid by insurance.
- C. manages a patient's care to ensure quality and cost-effectiveness.
- D. specializes in insurance contracts.

Correct answer: C

Rationale: see page 8 in the text.

Question #8

True or False. Improving access to health care services will require having more doctors to work in rural and medically underserved urban areas.

Correct answer: True

Rationale: see page 8 in the text.

Question #9

True or False. About 70% of baby boomers subscribe to traditional medical practice and therefore avoid complementary or alternative medical approaches.

Correct answer: False

Rationale: see page 10 in the text.

Question #10

The gap in insurance coverage for prescription drugs that Medicare patients must pay themselves is called a/an:

- A. individual mandate.
- B. donut hole.
- C. capitated expense.
- D. wait period.

Correct answer: B

Rationale: see page 11 in the text.

Question #11

An organized health care system where everyone has health care insurance coverage is called:

- A. managed care.
- B. a single-payer system.
- C. capitation.
- D. universal health care.

Correct answer: D

Rationale: see page 12 in the text.

Question #12

When patients have a medical problem prior to applying for health insurance, they have a/an:

- A. preexisting condition.
- B. benefit limitation.
- C. out-of-pocket expense.
- D. individual mandate.

Correct answer: A

Rationale: see page 11 in the text.

Question #13

When doctors order tests and treatments for patients to avoid potential lawsuits, it's called:

- A. managed care.
- B. universal health care.
- C. defensive medicine.
- D. preventive medicine.

Correct answer: C

Rationale: see page 12 in the text.

Question #14

When the government collects taxes for health care from all citizens and then uses that money to pay for the citizens' health care services, it's called:

- A. a single-payer system.
- B. capitation.
- C. a health care exchange.
- D. a medical home.

Correct answer: A

Rationale: see page 12 in the text.

Question #15

True or False. Accountable care organizations are networks where hospitals and doctors work together and share accountability to manage all of the health care needs of a large group of

Medicare patients for an extended period of time.

Correct answer: True

Rationale: see page 12 in the text.

Question #16

Which of the following is an *adverse effect*?

- A. Bed sores
- B. Hospital-acquired infections
- C. A patient falling out of bed
- D. A patient who can't afford to pay the doctor's bill
- E. All of the above
- F. None of the above

Correct answers: A, B, and C

Rationale: see page 14 in the text.

Question #17

The data that you gather before you start a quality improvement project is called:

- A. comparative data.
- B. baseline data.
- C. outcome data.
- D. performance data.

Correct answer: B

Rationale: see page 14 in the text.

Question #18

Six Sigma concepts are helping health care organizations:

- A. reduce waste and costs.
- B. find the root cause of problems.
- C. improve patient safety.
- D. reduce productivity.

Correct answers: A, B, and C

Rationale: see page 15 in the text.

Question #19

What is the difference between a *mistake* and an *error*?

Correct answer: A mistake is when you are incorrect in how you understand, interpret, or estimate something. An error is when you do something incorrectly through ignorance or carelessness.

Rationale: see pages 12 and 16 in the text.

Question #20

Which of the following are National Patient Safety Goals?

- A. To discharge patients as quickly as possible
- B. To use at least two ways to identify patients
- C. To remove labels from syringes and basins to avoid confusion
- D. To follow hand cleaning guidelines at least 80% of the time
- E. All of the above
- F. None of the above

Correct answers: B and D

Rationale: see page 16 in the text.