

# Care CEUs

## Understanding Psychosocial Needs

**1. Which description best captures the impact of psychosocial needs on residents' overall quality of life?**

- A. Consideration of residents' emotional health and physical therapy routines.
- B. Focus on residents' medical conditions and nursing schedules.
- C. Recognition of residents' cultural, social, and spiritual dimensions alongside emotional needs.
- D. Implementation of uniform social activities regardless of backgrounds.

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**2. Which approach exemplifies true person-centered care in long-term care settings?**

- A. Adhering to standardized group activity templates.
- B. Customizing daily routines and programs based on each resident's unique preferences, values, and life history.
- C. Delegating all decision making to clinical protocols and time frames.
- D. Aligning schedules strictly with staffing patterns.

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**3. What internal practice most effectively identifies facility resources needed to support residents' social engagement?**

- A. Conducting regular assessments of in-house social services, activity staff competencies, and interdisciplinary collaboration.
- B. Outsourcing community engagement entirely to external agencies.
- C. Basing programming solely on previous year's budget allocations.
- D. Prioritizing medical staffing counts over activity resource reviews.

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**4. Which strategy best leverages community partnerships to enrich resident life?**

- A. Establishing ongoing intergenerational partnerships with local schools and libraries for tailored programs.
- B. Purchasing standardized entertainment packages for passive consumption.
- C. Restricting community volunteers to emotionally intensive roles only.
- D. Limiting residents to in-house group activities without external engagement.

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**5. Which administrative practice most effectively upholds residents' cultural and spiritual expressions?**

- A. Enforcing strict medication rounds before all social interactions.
- B. Conducting one-off cultural sensitivity seminars without follow-up.

- C. Forming resident advisory councils to co-create culturally relevant activity and policy frameworks.
- D. Using generic satisfaction surveys administered annually.

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**6. Which action demonstrates strong administrative leadership in supporting psychosocial care?**

- A. Increasing clinical documentation to monitor psychosocial goals.
- B. Centralizing scheduling decisions within the administrative office.
- C. Eliminating volunteer facilitators to simplify oversight.
- D. Allocating dedicated budget and adaptive equipment while investing in staff training for holistic care.

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**7. Which method ensures effective volunteer integration into the activities program?**

- A. Allowing volunteers to join activities spontaneously without orientation.
- B. Recruiting only healthcare professionals as volunteers.
- C. Scheduling volunteers for tasks unrelated to resident needs.
- D. Creating structured volunteer committees with defined roles, training modules, and oversight protocols.

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**8. How should activity schedules be adjusted to honor person-centered care principles?**

- A. Maintaining identical activity times across all resident groups.
- B. Regularly surveying residents to tailor activity schedules to their preferred rhythms and energy levels.
- C. Scheduling programs exclusively during weekday mornings.
- D. Aligning activity times solely with staff availability.

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**9. What tool most reliably ensures your activities program complies with CMS requirements?**

- A. Using the CMS Activities Critical Element Pathway to audit assessments, care plans, and implementation records for each resident.
- B. Conducting unstructured staff meetings to discuss activity plans without documentation.
- C. Logging attendance in a basic spreadsheet without linking to care plans.
- D. Outsourcing compliance checks to a third-party consultant without internal review.

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**10. Which policy best promotes safe and enriching resident outings in the community?**

- A. Permitting family-led outings without formal protocols.
- B. Organizing weekly trips that disregard individual risk assessments.
- C. Relying on volunteers without background screening to escort residents.
- D. Implementing pre-trip health and mobility assessments, background-checked volunteers, and safety training for all outings.

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