

Multi-session Update for RGNs and HCSWs Quiz.

A. Our values and professionalism

1. Which of the following are important, but not in our values: compassion, honesty, fairness, transparency, communication, dignity, openness, caring, kindness, integrity, respect,
2. How would you define professionalism:
 - a) Being accountable, being a leader, being competent and being an advocate
 - b) The way we do things around here that gets the job done
 - c) A set of values, behaviours and relationships that underpins the trust the public has in the profession
3. How does the NMC view accountability? Select all that apply.
Practitioners must:
 - a) Accept responsibility for doing the activity
 - b) Have competence to undertake the intervention or activity
 - c) Have authority to carry out the activity, through delegation and organisational policies and protocols
 - d) Be a member of a trade union

B. Documentation: the golden thread to support the Nursing Process.

4. Six principles from the NMC Code relate to documentation are:
 - a) Made contemporaneously; identify problems; accuracy; own your entries; securely store records; apply data protection principles to research activities.
 - b) Written at end of your shift; use the nursing process; date and time entries; sign entries; omit abbreviations and jargon; keep records secure.
5. When evaluating care, write everything that has happened
True/False
6. When evaluating care, use care plan numbers and document care that deviates from the care plan. True/False

C. Pressure damage and wound management

7. Which is a definition of a pressure ulcer?
 - a) Localised injury, over bony prominences, resulting from pressure or pressure and shear.
 - b) Damaged caused by excessive perspiration, incontinence in the perineum, groins, inner thighs and natal cleft
8. Moisture damage is diffuse, can become infected, can be a kissing ulcer
True/False

9. Match the actions: Prevent pressure damage by:
- | | |
|----------------------|---|
| a) Assessing risk | i) use Intentional rounding and categorise damage |
| b) Assess skin | ii) Offload, change position, use equipment |
| c) Removing pressure | iii) Purpose T; |

D. Delirium Pathway: keep it on your RADAR.

10. Delirium is.. circle all that apply:

- a) An acute confusional state
- b) Sudden onset
- c) Can be caused by sepsis
- d) A severe illness that can fluctuate in its course
- e) Associated with mortality of up to 50% at 1 year

11. Radar questions:

- a) Is the person more active than usual, laughs a lot, confuses instructions
- b) Is the person more sleepy, has trouble following instructions; movements have slowed
- c) Is the person confused, has slow conversation, can easily take a drink

12. Actions if you have concerns about someone... circle all that apply:

- a) Don't worry, they'll be fine after a meal
- b) Act swiftly: delirium is a medical emergency
- c) Inform a nurse or doctor, so can undertake a 4AT
- d) Think about possible triggers
- e) Investigate: use NEWS, start FBC, take bloods
- f) Use the Delirium Management Comprehensive Pathway

E. Frailty, Falls and Orthostatic hypotension

13. Frailty is a state of increased vulnerability to adverse health outcomes True/ False

14. Identify five syndromes associated with frailty:

- a) Falls, delirium, continence, medicines challenges, immobility
- b) Falls, delirium, continence, age deterioration, an occasional exerciser
- c) Is over sixty; does not exercise, has high alcohol intake, falls, is isolated.

15. The RCPE lying and standing blood pressure:

- a) Takes ten minutes over two days, or
- b) Takes three minutes; three separate days.

16. Orthostatic hypotension is indicated by: circle all that apply:

- a) A drop in systolic BP of 20mmHg or more; b) a drop to below 90mmHg on standing; c) a drop in diastolic BP of 10mmHg with symptoms d) dizziness, pallor, weakness.