Test Your Knowledge Questionnaire

The Test Your Knowledge Questionnaire is used to determine your readiness to participate in the COVID-19 Consumer Direction Lite program option. The Test Your Knowledge Questionnaire will identify areas that you are knowledgeable and areas that you may need additional training to assure your health, safety, and well-being during the public health emergency. The Test Your Knowledge Questionnaire must be completed prior to your Consumer Direction Lite enrollment telephone call with your selected financial management agency. The waiver participant and the legally responsible person, live-in caregiver or non-live-in close kinship relative must complete a Test Your Knowledge Questionnaire and make it available to the financial management agency during your Consumer Direction Lite program enrollment.

1. What are activities of daily living? Place a check (✓) beside all items that you think are activities of daily living.

□Eating	□Personal hygiene
□Dressing	
□Dancing	□Transfer
□Bathing	□Mobility

2. Place a check (\checkmark) beside the correct definition of fraud.

____ Fraud is conspiring together to purposely obtain services in a deceptive manner by cheating or being dishonest.

____ Fraud is receiving more units of hours of services than what is needed.

____ Fraud is completing your timesheet correctly each week.

- 3. Fill in the blank with the correct answer. ______ is defined as a caregiver taking unfair advantage of a person.
- If I suspect abuse, neglect or exploitation, I am required to report it to my local Department of Social Services to ensure the safety of a disabled person. Yes No
- 5. If a waiver participant falls, goes to the emergency room or is admitted to the hospital while care is being provided or during any time during the day, a critical incident must be reported to the case manager.

Yes No _____

- 6. List three ways to prevent the spread of COVID-19:
 - 1. _____
 - 2. _____