

#1 TRAUMA INFORMED CARE TRAINING QUIZ

1. Which of the following is NOT a principle of Trauma-Informed Care (TIC)?
A) Realizing trauma's impact
B) Ignoring trauma symptoms
C) Responding with support
D) Resisting re-traumatization
2. When a youth refuses to follow directions, what should staff do?
A) Assume defiance and punish them
B) Recognize it may be a trauma response
C) Ignore their behavior
D) Immediately use a consequence
3. What is a key strategy to prevent re-traumatization?
A) Providing consistency and predictability
B) Using physical restraints for compliance
C) Ignoring trauma history
D) Reacting with frustration
4. Which of the following is an appropriate de-escalation method?
A) Yelling at the youth
B) Offering choices to give them control
C) Physically removing them immediately
D) Using punishment to gain compliance
5. What can worsen trauma in a family setting?
A) Open communication and support
B) Minimizing trauma and avoiding discussion
C) Seeking professional help
D) Encouraging emotional expression

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video.			

Staff Name:	 	
Date:		
Supervisor Signature:		



#2 INCIDENT REPORTING TRAINING QUIZ

 Where can you find the Incident Report form?
A. In the break room filing cabinet
B. Under the staff's email inbox
C. On the computer under 'Incident Reports'—save by date and youth involved
D. In the youth's personal binder
2. What are the key differences between major and minor incidents?
A. Major incidents involve scheduling and minor ones involve noise
B. Major incidents are emergencies; minor ones require documentation but are less severe
C. Major incidents include self-harm or safety threats; minor ones are less severe but still
documented
D. Minor incidents are private and do not require any report
3. Why is it important to document minor incidents?
A. To document for a youth's chart and help track progress or needs
B. It helps prevent escalation and ensures a complete behavior record
C. It fills time during shifts
D. It allows other staff to punish youth later
4. What should be done in the case of a major incident?
A. Talk to the youth privately and move on
B. Contact on-call, follow de-escalation, complete a CIR, and notify admin
C. Ignore until the end of the shift
D. Let the youth explain to the team later
5. How soon must an incident report be completed after a crisis?
A. Within 24 hours
B. By the end of the following day
C. Before the end of the shift; major incidents reported within 3 hours
D. After the youth calms down fully
6. What are the required steps after a physical management situation?
A. Wait for admin to review cameras
B. Log the restraint and check out
C. Notify on call and treatment team; submit report to State of Colorado CIR Reporting
D. Let youth self-report to licensing
7. Who must be notified in case of an emergency?
A. Only the supervisor
B. Only the youth's parent
C. 911(possibly), on-call personnel, youth's treatment team
D. The front office and peer staff
8. What are the essential components of an effective report?
A. Staff opinions, summaries, and emotions
B. Gossip, past issues, and complaints
C. Clear details, actions taken, involved parties, and follow-up steps
D. Generalized summaries with names omitted
9. Why is staff debriefing important?
A. It gives time to vent frustrations
B. It improves morale before the next crisis

C. It helps staff process events and prevent secondary trauma
D. It offers a chance to write personal notes

10. What is the role of the State of Colorado CIR Reporting?
A. Track meals served at the facility
B. Schedule youth activities
C. Ensure compliance and oversight of major incidents
D. Provide staffing recommendations

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Staff Name:
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#3 Quiz - Suicide Prevention in QRTP Settings

1. What is the national ranking of suicide as a cause of death for youth ages 10–24 in the U.S.?

- A. 1st
- B. 2nd
- C. 3rd
- D. 5th

2. Which two youth demographics are at significantly higher risk for suicide attempts?

- A. African American youth and youth with ADHD
- B. LGBTQ+ youth and Native American/Alaska Native youth
- C. Foster youth and Hispanic youth
- D. Children under age 10 and immigrant youth

3. Which of the following are psychological risk factors commonly seen in QRTP youth?

- A. Learning disabilities and asthma
- B. ADHD, bedwetting, and shyness
- C. Major Depression, PTSD, and Bipolar Disorder
- D. High IQ, low peer involvement, and hunger

4. Which two behaviors may indicate a youth is at risk of suicide?

- A. Excessive talking and overeating
- B. Increased energy and athletic involvement
- C. Talking about death and giving away possessions
- D. Hyperactivity and nail-biting

5. What is the gold standard screening tool for suicide risk in residential settings?

- A. PHQ-9
- B. DBT Diary Card
- C. ASQ Screening
- D. Columbia Suicide Severity Rating Scale (C-SSRS)

6. Why does language matter when speaking with youth about suicide?

- A. Euphemisms are easier for youth to hear
- B. Direct language builds trust and clarity
- C. Avoiding direct terms keeps youth calm
- D. Using slang helps normalize the topic

7. Which are two essential components of a QRTP suicide prevention protocol?

- A. Extra snacks and shorter therapy sessions
- B. Daily journaling and yoga classes
- C. 24/7 supervision documentation and room searches
- D. Group therapy and peer evaluations

8. Which elements belong in a youth's suicide safety plan?

- A. Favorite music, chores, and jokes
- B. Daily medication, doctor's name, insurance
- C. Warning signs, coping strategies, and who to contact
- D. Caseworker contact and school schedule

9. What are two follow-up tools mentioned for managing ongoing suicide risk?

- A. C-SSRS and ORS/SRS forms
- B. CAMS and DBT diary cards
- C. Safety plan and BMI chart
- D. PHQ-9 and COVID screener

10. What is the final takeaway for QRTP staff in suicide prevention?

- A. Report risk to the guardian and move on
- B. Use only written tools to screen for risk
- C. Staff are the intervention—build safety and act without hesitation
- D. Let the therapist handle it and avoid direct conversation

Staff Acknowledgment

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Staff Name:		
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Supervisor Signature:		

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#4 STAFF BURNOUT TRAINING QUIZ

What is Secondary Traumatic Stress (STS)?

- A. Physical fatigue caused by overnight shifts
- B. Emotional distress from hearing trauma stories
 - C. A type of learning disability in youth
- D. Anger caused by working with difficult coworkers

2. Which of the following is a sign of burnout?

- A. Increased motivation
- B. Desire to learn new skills
- C. Feeling unappreciated and emotionally exhausted
 - D. Wanting to work more overtime

3. What is an effective self-care strategy?

- A. Skipping meals to stay alert
- B. Taking breaks, exercising, and staying hydrated
 - C. Avoiding team meetings
 - D. Keeping feelings bottled up to appear strong

4. How can staff build resilience?

- A. Avoiding emotional conversations with peers
 - B. Working through breaks to stay productive
- C. Participating in debriefings and peer support groups
 - D. Taking on additional youth assignments

5. What can organizations do to help prevent staff burnout?

- A. Encourage staff to avoid expressing stress
 - B. Require overtime when needed
- C. Offer flexible scheduling and mental health benefits
 - D. Remind staff not to take work personally

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5 Sex Trafficking Awareness Quiz

According to U.S. federal law, what makes a minor automatically considered a victim of sex trafficking?
a) If they are kidnapped
b) If they are involved in any commercial sex act
c) If they are under 18 and involved in commercial sex, regardless of coercion
d) If they have a history of abuse
2. Which of the following is NOT a common red flag of sex trafficking?
a) Multiple hotel key cards and prepaid cash
b) Having a significantly older boyfriend
c) Attending school daily and making honor roll
d) Avoiding eye contact and appearing fearful
3. What does the control tactic of "debt bondage" involve?
a) Offering a victim a loan for education
b) Physically restraining someone with chains
c) Making the victim feel they owe money for basic needs
d) Forcing the victim to steal for the trafficker
4. Which of the following youth are most at risk for sex trafficking? (Select two)
a) Youth in foster care
b) High-achieving athletes
c) Runaway or homeless youth
d) Youth in two-parent households with high income
5. How many people are estimated to be trapped in forced sexual exploitation globally (ILO, 2022)?
a) 1.2 million
b) 4.8 million
c) 9.3 million
d) 12.5 million
6. Which of the following platforms are traffickers known to use for grooming? (Select two)

a) Instagram

b) Snapchat
c) Duolingo
d) Zoom
7. Which physical locations are commonly linked to sex trafficking? (Select two)
a) Hotels/motels
b) Truck stops
c) Movie theaters
d) Schools
8. Why do many victims not self-identify as being trafficked?
a) They don't understand English
b) They fear law enforcement or feel loyal to the trafficker
c) They are under strict lockdown
d) They want to protect their siblings from school
9. What is the main principle behind trauma-informed care?
a) Convincing the victim they need rescue
b) Requiring victims to tell their full story immediately
c) Creating safety, trust, and avoiding blame
d) Using strict rules to gain control of the situation
10. Which is a national resource for reporting or seeking help regarding human trafficking?
a) Domestic Violence Hotline
b) National Human Trafficking Hotline
c) Red Cross Disaster Relief
d) 911 Crisis Text Line
Staff Acknowledgment
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#6 Daisy Center Cultural Competency & EDI Quiz

1. What is the primary purpose of the Daisy Center's Cultural Competency Policy (Procedure #: D-6)?

- A) To train staff in legal reporting requirements
- B) To encourage youth to follow rules more strictly
- C) To build a trauma-informed, culturally responsive treatment environment
- D) To teach youth how to speak multiple languages

2. How does the Daisy Center ensure cultural responsiveness starts during the intake process?

- A) By assigning chores based on cultural background
- B) By conducting pre-admission video calls and using a Youth and Family Questionnaire
- C) By offering religious classes to all youth
- D) By separating youth based on ethnicity

3. Which two methods are used by the Daisy Center to remove language barriers?

- A) Posting rules in multiple languages and banning slang
- B) Offering Spanish-speaking staff and providing translated handbooks
- C) Hiring only bilingual staff and eliminating all English-only documents
- D) Allowing peer interpreters and writing everything in Spanish

4. How does the Daisy Center support LGBTQ+ and Trans youth?

- A) By holding weekly gender discussions
- B) By requiring youth to list their gender on intake
- C) By providing gender-affirming clothing, using correct names/pronouns, and offering safe spaces
- D) By encouraging youth to explore all identities regardless of preference

5. What is "covert coercion" and how is it addressed at the Daisy Center?

- A) A technique used to get youth to comply quickly
- B) The silent treatment given by staff
- C) Implied threats or pressure; it is avoided through shared ownership and transparency
- D) A method of discipline involving hidden consequences

6. How does the Daisy Center integrate staff culture into its community?

- A) By assigning themed uniforms
- B) By hosting Culture Nights and potlucks that celebrate diverse traditions
- C) By creating staff-only lounges
- D) By hiring based on ethnicity quotas

7. What is the role of annual cultural competency training and self-assessments?

- A) To check off HR requirements only
- B) To ensure staff complete a cultural trivia game
- C) To develop and maintain cultural competence and inclusive practices
- D) To prepare for cultural exchange trips

8. How does the Daisy Center measure the effectiveness of its EDI policies?

- A) By reviewing therapy transcripts
- B) By tracking academic scores only
- C) Through staff/youth surveys and incident report analysis related to culture
- D) Through informal conversations with staff

9. How does the Daisy Center include youth voice and choice in daily treatment?

- A) Youth vote on discipline procedures
- B) Youth choose therapy activities, room décor, and meal planning input
- C) Youth are allowed to opt out of all programming
- D) Youth can text their preferences to staff anonymously

10. How does the Daisy Center recognize staff for demonstrating trauma-informed and culturally responsive care?

- A) By requiring weekly essays
- B) Through anonymous suggestion boxes only
- C) Through public acknowledgments, Employee Spotlights, and incentives like gift cards
- D) By promoting them without notice

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#7 NON VIOLENT CPI TRAINING QUIZ

1. What are the three key stages of escalation? A. Frustration, Reaction, Reflection

B. Tension, Aggression, Resolution

C. Energy Charge, Emotional Charge, and Powerlessness

D. Denial, Anger, Bargaining

2. What is the correct staff response to verbal aggression?

A. Match the tone to show strength

B. Stay calm, use a neutral tone, and avoid power struggles

C. Ignore the youth until they calm down

D. Use firm language and immediate consequences

3. Why is offering choices important in de-escalation?

A. It speeds up compliance

B. It confuses the youth into calming down

C. It gives youth a sense of control and reduces escalation

D. It allows staff to shift responsibility

4. Which of the following are non-verbal techniques for de-escalation?

A. Crossed arms and direct eye contact

B. Avoiding eye contact, standing close, and raising your voice

C. Calm eye contact, open posture, and speaking softly

D. Fast hand gestures and pacing

5. What is the primary goal when handling a youth's tantrum?

A. To establish authority

B. To apply consequences immediately

C. To remove them from the group

D. To de-escalate without reinforcing negative behavior

6. What are the three components of a crisis intervention plan?

A. Behavior chart, room time, staff log

B. Identified triggers, self-help strategies, and supportive staff actions

C. Safety room use, restraint options, call log

D. Medication list, youth schedule, contact sheet

7. What is the first action staff should take when a youth is escalating?

A. Restrain the youth before they act

B. Walk away to let them calm down

C. Recognize early warning signs and begin de-escalation

D. Give a warning and prepare a consequence

8. How should staff respond when two youths are in conflict?

A. Take sides with the calmer youth

B. Separate them and assign both consequences

C. Stay neutral, guide mediation, and encourage youth-led resolution

D. Remove both youths from the group permanently

9. When should police be called during a crisis?

A. When the youth talks back repeatedly

B. If a peer reports a youth for stealing

C. If the situation becomes unmanageable and safety is at risk

D. When staff feel overwhelmed

10. Which of the following best summarizes three key takeaways from this training?

A. Set firm limits, stay in control, and issue consequences

B. Recognize early signs, use non-verbal communication, and implement trauma-informed strategies

C. Allow peer support, offer punishments, and document everything
D. Ignore verbal aggression, use redirection, and prepare isolation space

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#8 RISK MANAGEMENT TRAINING QUIZ

1. What are three early warning signs that may indicate potential escalation?

- A. Laughing, clapping, and daydreaming
- B. Clenched fists, pacing, and rapid speech
 - C. Sleepiness, hunger, and smiling
 - D. Eye contact, standing still, and writing

2. What are two de-escalation techniques staff can use to calm a youth?

- A. Raising your voice and using threats
- B. Speaking quickly and changing the subject
- C. Speaking calmly and validating emotions
- D. Standing close and using firm commands

3. How should staff respond to verbal aggression?

- A. Challenge the youth's behavior with firm language
- B. Remain neutral, acknowledge emotions, and redirect to solutions
 - C. Ignore the youth until they stop yelling
 - D. Threaten consequences to regain control

4. What is the purpose of crisis intervention protocols?

- A. To enforce rules and maintain strict order
- B. To remove youth from the group as punishment
- C. To assess safety, de-escalate, remove stressors, and involve team support
 - D. To create documentation for licensing only

5. What is a key element of post-crisis debriefing?

- A. Reviewing house rules
- B. Assigning consequences immediately
- C. Providing a safe space for the youth to reflect
 - D. Informing peers of what occurred

6. Why is it important to offer youth choices during de-escalation?

- A. To delay crisis response
- B. It helps youth feel in control and reduces defiance
 - C. It avoids the need for documentation
 - D. It guarantees quick compliance

7. What should staff avoid when responding to verbal aggression? A. Staying calm B. Giving space C. Raising their voice or engaging in arguments D. Using neutral language 8. How does maintaining professionalism help during a crisis? A. It makes documentation easier B. It keeps the youth from noticing the crisis C. It models appropriate behavior and reduces conflict D. It shows other staff who's in charge 9. Why is follow-up planning important after a crisis? A. It reduces paperwork B. It allows youth to process in isolation C. It helps identify coping strategies and improve outcomes D. It allows staff to enforce restrictions 10. What is the overall goal of de-escalation training at the Daisy Center? A. To ensure strict rule enforcement B. To document all youth behaviors C. To create a structured, safe environment where youth learn to regulate emotions D. To reduce the number of staff involved in crises Staff Acknowledgment I confirm that I have completed the Risk Management Training and watched the required

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Staff Name:
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#9 CHILD DEVELOPMENT TRAINING QUIZ

1. What is the best definition of child development?

A. The physical growth of a child only

B. The ability of a child to behave well in public

C. The process by which children grow and mature physically, cognitively, emotionally, and socially

D. The education a child receives during school

2. Which of the following is a primary domain of child development?

A. Dietary habits

B. Sleep routines

C. Emotional regulation

D. Parenting style

3. What is a key social-emotional milestone for toddlers (ages 1-3)?

A. Solving algebraic equations

B. Developing basic impulse control and testing autonomy

C. Understanding sarcasm

D. Reading simple stories independently

4. How does trauma impact executive functioning in children?

A. It increases their ability to multitask

B. It improves memory and focus

C. It delays the development of planning, impulse control, and problem-solving

D. It only affects physical development

5. Which of the following is an example of how consistent routines support development in residential care?

A. Avoiding expectations to reduce pressure

B. Allowing unlimited freedom to increase independence

C. Providing predictable schedules that create a sense of safety

D. Limiting daily activities to reduce stimulation

6. What does the "Trauma Lens Reminder" encourage staff to ask?

A. "Why are you acting like this?"

B. "What's wrong with you?"

C. "Who taught you that behavior?"

D. "What happened to you?"

7. Which is a significant cognitive milestone for children aged 6–12?

- A. Beginning to develop abstract thinking
 - B. Learning to walk
 - C. Recognizing facial expressions
- D. Mastering reading and problem-solving skills

8. What is an example of behavioral regression?

- A. A teenager studying for finals
- B. A 10-year-old suddenly wetting the bed
 - C. A toddler learning to talk
 - D. A youth asking for more privileges

9. How can staff model co-regulation with youth?

- A. Ignoring emotional outbursts until the youth calms down
- B. Matching the youth's emotional state to show empathy
- C. Remaining calm and helping the youth return to regulation through grounding techniques
 - D. Telling the youth to calm down repeatedly

10. When should staff consider referring a child to a specialist?

- A. When a youth refuses to do chores
- B. If the youth lies or exaggerates stories
- C. When the youth exhibits consistent developmental delays, severe mood swings, or self-harm
 - D. If the youth isolates themselves once in a while

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Staff Name:
Date:
Supervisor Signature:

THE DAILS

10 CHILDHOOD TRAUMA TRAINING QUIZ

1.	What is	childhood	trauma,	and how does	it affect y	outh?

- A. A phase of adolescent rebellion with no long-term impact
 - B. Natural emotional distress that builds resilience
- C. Experiences like abuse, neglect, or loss that impact trust and behavior
 - D. A mental illness caused by poor parenting

2. What are common trauma triggers that staff should be aware of?

- A. Excessive praise and celebration
- B. Loud noises, unexpected touch, and sudden changes
 - C. Group therapy and structured schedules
 - D. Healthy routines and physical exercise

3. Why is it important to shift from "What's wrong with you?" to "What happened to you?"

- A. It makes youth feel less responsible for their actions
 - B. It encourages staff to focus on compliance
- C. It reframes behavior through a lens of empathy and understanding
 - D. It helps youth avoid consequences

4. How does trauma affect a child's emotional and behavioral development?

- A. It increases intelligence and focus
- B. It promotes self-discipline and maturity
- C. It can lead to hypervigilance, withdrawal, and difficulty with emotional regulation
 - D. It has no impact beyond the event itself

5. What are some trauma-informed strategies staff can use to help youth regulate emotions?

- A. Use confrontation and consequences immediately
 - B. Encourage isolation to avoid overstimulation
- C. Apply grounding techniques and validate feelings
 - D. Use firm redirection without discussion

6. Why is family engagement important in trauma-informed care?

- A. It ensures families are held accountable
 - B. It allows staff to redirect blame
- C. It helps provide stability and supports long-term healing
 - D. It shifts responsibility from staff to parents

7. What are key components of a trauma-informed approach at the Daisy Center?

- A. Rule enforcement and consequence management
- B. Trust-building, emotional validation, cultural responsiveness, and avoiding

re-traumatization

- C. Behavior charts and scheduled restrictions
 - D. Limiting family contact to reduce stress

8. How can staff avoid re-traumatizing a youth?

- A. Use a stern voice to gain compliance
- B. Limit physical space to maintain control
- C. Approach calmly, respect boundaries, and avoid known triggers
 - D. Push youth to confront trauma directly

9. What role does cultural responsiveness play in trauma-informed care?

- A. It ensures all youth follow the same expectations
 - B. It helps youth assimilate into dominant culture
- C. It adapts care to a youth's identity, background, and unique needs
 - D. It makes trauma care more efficient

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Staff Name:
Date:
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11 EMPLOYEE BOUNDARIES TRAINING QUIZ

Why are professional boundaries important at the Daisy Center?

- A. They help staff make personal connections
 - B. They promote faster discharge timelines
- C. They protect both staff and youth, ensuring ethical conduct and safety
 - D. They prevent youth from building trust

2. What is an example of appropriate physical contact with a youth at the Daisy Center?

- A. Side hugs when necessary or a high-five
- B. Sitting youth on your lap during story time
 - C. Long hugs for emotional support
 - D. Holding hands while walking outside

3. What is a crucial aspect of maintaining communication boundaries with youth?

- A. Share personal struggles to build rapport
 - B. Use nicknames and private jokes
- C. Maintain professional and appropriate communication, avoiding personal discussions
 - D. Allow youth to contact staff after hours

4. What type of information about a youth should never be shared outside of professional settings?

- A. Their age and room number
- B. Any confidential or identifying information
 - C. Their favorite food or color
 - D. Their academic grades

5. Why are counselors prohibited from accepting friend requests from youth on social media?

- A. Because it violates HIPAA
- B. Because youth might post inappropriate content
- C. To maintain professionalism and ethical standards
 - D. To avoid overuse of social media

6. What must occur before taking youth on an outing?

- A. Tell the youth's favorite staff and go
 - B. Ensure parents are informed
- C. Outings must be approved by a supervisor beforehand
 - D. Confirm the youth packed a snack

7. For how long are youth prohibited from staying with staff after discharge?

- A. They can stay immediately if they're 18
 - B. One week
 - C. Until the youth has secured housing
- D. There is a set waiting period after discharge

8. What is prohibited regarding tobacco, vaping products, or substances at the Daisy Center?

- A. They can be used during staff breaks and off campus only
 - B. Only youth are prohibited from use
 - C. Use is strictly prohibited on the premises
 - D. Staff may vape outside during non-contact hours

9. What is an example of an ethical boundary that counselors must uphold?

- A. Accept gifts from youth to show appreciation
- B. Maintain dual relationships with youth for emotional support
- C. Avoid dual relationships, maintain confidentiality, and do not accept gifts
 - D. Spend 1:1 time with youth outside of shift hours

10. Where should counselors seek support if experiencing their own struggles?

- A. Talk to a youth they trust
- B. Post about it in a private group chat
- C. Seek support from their supervisor or designated staff support services
 - D. Ignore it until it affects work performance

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Staff Name:
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#12 EMERGENCY/ DRILLS TRAINING QUIZ

1.	What is the	first action	you should take u	pon discoverin	g a fire?

- A. Try to extinguish the fire yourself
 - B. Open all windows and doors
- C. Activate the fire alarm and begin evacuation procedures
 - D. Call your supervisor before acting

2. What is the designated safe zone for most emergency evacuations at the Daisy Center?

- A. Inside the main hallway by the office
- B. The predetermined assembly point outside the facility
 - C. The youth living room
 - D. Any room without windows

3. What are two actions you should take if you receive a bomb threat phone call?

- A. Hang up and call 911
- B. Argue with the caller and demand proof
- C. Remain calm, listen carefully, take note of details, and notify authorities
 - D. Announce the threat to all youth immediately

4. What is the primary goal during an active shooter situation?

- A. Call for backup
- B. Confront the shooter if possible
- C. Secure all doors and activate alarms
 - D. Survive—Run, Hide, Fight

5. What should you do if you suspect a gas leak in the facility?

- A. Light a match to test for odor
- B. Evacuate immediately, avoid using electrical devices, and call emergency services
 - C. Open all windows and turn on the stove fan
 - D. Call maintenance and wait for them to check it

6. What should you do if a youth collapses and appears to be unresponsive?

- A. Move them immediately to a bed
- B. Check responsiveness, call 911, and provide CPR if trained

- C. Wait to see if they wake up before calling for help
 D. Call another youth for assistance
- 7. What should you do in the event of a tornado?
 - A. Evacuate to the parking lot
 - B. Move youth to the kitchen area
- C. Move to an interior room away from windows and take cover
 - D. Lock all exterior doors and windows
- 8. Why is it important to avoid turning electrical switches on or off during a gas leak?
 - A. It could cause you to lose power
 - B. It's not necessary if the gas smell is weak
 - C. It can trigger an explosion if gas is present in the air
 - D. Only maintenance staff are allowed to use switches
 - 9. How often should the Daisy Center conduct fire and bomb threat drills?
 - A. Once every two years
 - B. Only when licensing reviews are scheduled
 - C. Regularly, as per Daisy Center safety policies
 - D. Every time there's a new youth intake
- 10. What should you do after providing initial first aid to an injured individual?
 - A. Return to your routine duties
 - B. Leave them alone to rest
 - C. Stay with the injured person and provide additional aid until medical help arrives
 - D. Fill out incident paperwork immediately and move on

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#13 YOUTH BOUNDARIES TRAINING QUIZ

1. What is the required notice period for a youth to request a guest visit, and why?

- A. Day-of notice to allow flexibility
- B. One-week notice for meal planning
- C. At least 24 hours in advance to ensure safety and supervision
 - D. No notice needed if guest is a relative

2. Which two behaviors are appropriate between youth in common areas?

- A. Cuddling and lap-sitting
- B. Holding hands and a short goodbye kiss
- C. Laying under a blanket together and long hugs
- D. Talking appropriately and sitting next to each other with appropriate space

3. What is Daisy Center's policy on dating relationships between youth residents, and why is it in place?

- A. Dating is encouraged to build social skills
- B. Dating is not allowed with residents of the home to prevent trauma and focus on treatment
 - C. Dating is monitored with visits in designated areas to prevent inappropriate behavior
 - D. Youth may date if over age 16 and on level 3

4. What are two possible consequences for bullying another resident?

- A. Extra chores and peer mediation
- B. Room change and therapy group
- C. Allowance deductions and level restrictions
 - D. Staff timeout and free-writing

5. What should staff do if they witness inappropriate sexual behavior between youth?

- A. Separate them and ignore it if it stops
 - B. Document it later if necessary
- C. Notify a on call immediately and enforce appropriate consequences and document
 - D. Let the therapist handle it during the next session

6. What documentation is required for youth pet visitations?

- A. A picture of the pet and visitation schedule
 - B. Vet name and size of the pet
 - C. Emergency contact for pet
- D. Approved health records and pre-visit documentation and permission

7. If a visitor arrives under the influence, what must staff do?

- A. Allow them to rest in the waiting room
- B. Let the youth decide if they want to proceed
- C. keep youth in laundry room under LOS and notify a supervisor immediately
 - D. Offer water and allow a supervised visit

8. What is Daisy Center's policy on entering another resident's bedroom?

- A. Allowed with a peer and permission
 - B. Permitted during free time
 - C. Not allowed without permission
 - D. Only allowed after school

9. What are the supervision guidelines for parental visits?

- A. All visits must be supervised to ensure safety and guideline adherence
 - B. Parents may visit without staff if the youth agrees
 - C. Visits require one staff nearby but not present

D. Requirements for visitation supervision is dictated by the youth's team and will predetermined before the visit occurs

10. Which are approved visitation locations at the Daisy Center?

- A. Southside Kitchen, Therapy Room, Outside Patio and Game Room B. Staff lounge, laundry room, and entryway
 - C. Front living room, volleyball court, and outdoor patio
 - D. Dining area, medication room, and vehicle

I confirm that I have completed the Youth Boundaries Training and watched the required
video.
Staff Name:
Date:
Supervisor Signature:

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#14 POLICY PROCEDURES TRAINING QUIZ

1. What is the primary goal of The Daisy Center's Annual Financial Review policy?

A. To reduce annual spending by 15%

B. To complete financial audits for tax purposes

C. To ensure fiscal transparency, budget accuracy, and long-term financial planning

D. To calculate staff bonuses

2. Who is responsible for preparing and reviewing the Daisy Center's annual budget?

A. The on-call therapist

B. The Director and Finance Officer, with board oversight

C. The youth care staff

D. State licensing specialists

3. What certification is required for staff to administer medication at The Daisy Center?

A. CPR/First Aid

B. CNA License

C. QMAP (Qualified Medication Administration Personnel)

D. EMT Certification

4. What right do youth have in relation to medication at The Daisy Center?

A. They must take all medications prescribed without question

B. They can demand over-the-counter meds at any time

C. They have the right to refuse medication

D. They can administer their own prescriptions

5. What constitutes a "critical incident" at The Daisy Center?

A. Any minor disagreement between staff

B. A youth refusing to do chores

C. Any serious event involving safety risks, physical restraint, harm, or emergency services

D. Youth sleeping past wake-up time

6. What is a required action following a critical incident?

A. Ignoring the behavior and debriefing later

B. Verbal documentation only

C. Completing a Critical Incident Report (CIR) and staff debrief

D. Allowing youth to handle it independently
7. What are the key tenets of the Daisy Model of care? A. Strict behavioral control and fast consequences B. Trauma-informed, relationship-based, individualized, continuous improvement C. Clinical therapy only with no behavior tracking D. Peer-run discipline and group-led interventions
8. What is the primary purpose of unannounced emergency evacuation drills at The Daisy Center? A. To discipline uncooperative youth B. To meet fire department quotas C. To test staff's ability to evacuate youth during unpredictable events D. To assess the weather impact
9. Who is responsible for managing petty cash and ensuring it is used properly? A. The lead youth mentor B. All staff members equally C. The Program Director or designee with documentation D. County caseworker
A. By requiring staff to speak multiple languages B. Through annual cultural training, inclusive practices, and hiring diverse staff C. By celebrating youth birthdays D. By assigning youth to staff from the same background
Staff Acknowledgment I confirm that I have completed the Medication Training and watched the required video. Staff Name: Date:
Supervisor Signature:

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#15 ORIENTATION TRAINING QUIZ

 What are the key elements of the admission process for a new youth arriving a
the facility?

- A. Greet the youth, assign a room, and hand over medication
- B. Introduce youth to peers, give chores, and schedule therapy
- C. Introduce to staff, complete paperwork, document belongings, and give a facility
 - D. Conduct a security check and assign level

2. Why is it important to document all personal belongings during the admission process?

- A. To allow the youth to sell their items
- B. To prevent disputes and ensure accountability
 - C. So youth know what they brought
 - D. To speed up the intake process

3. What are three key points that should be covered during the facility tour?

- A. Bedrooms, staff lounge, and laundry room
- B. Living spaces, key facility areas, and emergency exits
 - C. Intake desk, dining rules, and mailbox locations
 - D. Bathrooms, medication cabinet, and file room

4. Why is it important to explain emergency procedures to new youth, and what's one example?

- A. It ensures youth follow rules without question
 - B. It helps prevent anxiety
- C. It helps youth stay safe—such as knowing evacuation routes during a fire
 - D. It provides something to talk about on the tour

5. Why is a structured but supportive environment important for behavioral expectations?

- A. It limits youth autonomy
- B. It creates fear to improve compliance
- C. It provides consistency while helping youth feel secure and respected
 - D. It simplifies staff workload

6. What are staff responsibilities regarding medication handling?

- A. Store them in personal lockers
- B. Let youth self-administer when appropriate
- C. Ensure secure storage, accurate administration, and proper documentation
 - D. Only administer on the night shift

7. Which items are typically included in the Youth Orientation Packet?

- A. Bus passes, peer bios, and art supplies
- B. Daily schedule, emergency procedures, and facility rules
 - C. Phone list, coloring pages, and youth feedback form
 - D. Internet policy, job applications, and menus

8. What should staff do to help ensure the youth understands expectations and services?

- A. Ask the youth to read the handbook on their own
 - B. Assign a peer to explain the rules
- C. Clearly explain rules, answer questions, and provide written materials
 - D. Refer questions to the therapist only
- 9. Why is it important to provide youth with a written handbook upon admission?
 - A. So they can memorize the rules
 - B. It serves as a behavioral contract
 - C. So they have access to all important info at their own pace
 - D. It's required for licensing only
 - 10. Why is a thorough orientation process essential for both youth and staff?
 - A. It reduces paperwork later
 - B. It helps youth feel comfortable and prepares staff for immediate needs
 - C. It prevents youth from challenging authority
 - D. It's part of the disciplinary process

confirm that I have completed the Orientation Training and watched the required video.
Staff Name:
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Supervisor Signature:

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#16 YOUTH BEHAVIOR TRAINING QUIZ

1. What is madina-initialitied Gale (11G), and why is it initialitian this cipt	TC), and why is it important in discipline?
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- A. A medical approach focused only on diagnoses
 - B. A reward system for youth who behave well
- C. A model recognizing how trauma influences behavior and emphasizing empathy and support
 - D. A system that limits youth freedom to increase safety

2. Which of the following are acceptable discipline techniques at the Daisy Center?

- A. Time-outs, withholding meals, and shaming
- B. Positive reinforcement, logical consequences, and restorative conversations
 - C. Room isolation, peer confrontation, and writing sentences
 - D. Detention, forced apologies, and extra chores

3. Why is physical punishment prohibited in youth care facilities?

- A. It's too time-consuming to document
 - B. It's difficult to enforce
- C. It may cause further trauma and doesn't teach appropriate behavior
 - D. It is not cost-effective

4. Which are examples of preventative discipline strategies staff can use?

- A. Threatening consequences and isolating youth
- B. Ignoring minor behaviors and increasing structure
- $\hbox{C. Setting clear expectations and engaging youth in meaningful activities}\\$
 - D. Removing privileges preemptively

5. How does restorative justice promote accountability?

- A. It punishes youth through peer confrontation
- B. It allows staff to determine consequences quickly
- C. It requires youth to take responsibility, repair harm, and understand impact
 - D. It assigns points based on behavior charts

6. Why is relationship-building important for behavior management?

- A. It reduces staff supervision needs
- B. It helps staff manipulate youth behavior
- C. It fosters trust, making it easier to guide and support youth
 - D. It replaces the need for consequences

7. What should staff do if de-escalation techniques do not work?

- A. Use physical restraint immediately
 - B. Call a peer to help redirect
- C. Remove the youth from the room without warning
- D. Follow crisis protocols, contact on-call support, and ensure safety

8. Which are prohibited discipline techniques, and why are they inappropriate?

- A. Taking breaks, redirection, and group support—too lenient
- B. Shaming, physical force, and verbal humiliation—they cause harm and reinforce trauma
 - C. Journaling, mediation, and praise—they delay consequences
 - D. Logical consequences, choices, and boundaries—they require too much time

9. What are key components of an effective Individualized Support Plan (ISP)?

- A. General behavior goals and classroom schedules
- B. Youth preferences, peer reviews, and community ratings

C. Youth-specific triggers, strengths, strategies, and coping tools
D. Assigned punishment lists and incentive charts

10. How should staff respond if a youth disrupts a group activity?

- $\hbox{A. Publicly call them out to deter others}\\$
 - B. Ignore it unless peers complain
- C. Redirect calmly, validate feelings, and offer a choice to re-engage or take space

 D. End the activity immediately for the group

Staff Acknowledgment

Supervisor Signature:

I confirm that I have completed the Youth Behavior Training and watched the required
video.
Staff Name:
Date:

#17 MEDICATION TRAINING QUIZ

1. Who is authorized to administer medications at the Daisy Center, and what certification must they possess?

A. Any shift lead or team supervisor

- B. Any staff member on duty with permission
- C. Only authorized staff with proper medication administration certification (QMAP)
 - D. Peer staff with training in CPR

2. What are the 'Seven Rights of Medication Administration' and why are they crucial?

- A. Medication, Mind, Dosage, Route, Time, Reason, Document A checklist to help with medication storage
 - B. Medication, Patient, Dosage, Mouth, Time, Reason, Document A set of reminders for pharmacy deliveries
- C. Medication, Patient, Dosage, Route, Time, Reason, Document: Guidelines that ensure accuracy and safety to prevent errors and harm
 - D. Medication, Patient, Dosage, Route, Time, Answer, Document Optional policies for nurses only

3. What is the proper procedure if a youth refuses to take their prescribed medication?

- A. Ask another youth to encourage them
- B. Force the youth if it's critical to their plan
- C. Document the refusal, notify a supervisor, and do not force it
 - D. Ignore the refusal unless repeated

4. What are the requirements for storing medications, including controlled substances?

- A. Behind Double Lock, Locked cabinet; original packaging; controlled substances require extra security
 - B. Any locked drawer in the office
 - C. Plastic baggies labeled by hand
 - D. Only temperature control is required

5. What steps should a staff member take after making a medication error?

- A. Apologize to the youth and try again later
 - B. Report it at the end of the week
- C. Report the error immediately, document it, monitor the youth, and follow corrective actions
 - D. Only document if the youth reacts poorly

6. What is the correct procedure for disposing of expired or discontinued medications?

A. Flush them immediately and log the action

B. Give them to the parent at next visit C. Mix with food waste and discard D. Two staff must witness and document; mix solids with water, liquids with cat litter or coffee grounds 7. Why is cat litter added when disposing of liquid medications? A. It makes the container heavier for safety B. It helps prevent the medication from leaking C. It neutralizes the liquid and prevents misuse D. It improves absorption into landfill waste 8. What is required when a youth needs to take medication off-site? A. A quick verbal confirmation B. Pack the meds in a blank envelope C. Medications must be properly labeled before off-site use D. The youth can carry the medication themselves 9. What is required when a youth is discharged? A. Leave medications in the med cabinet for future use B. Discard everything unless the youth requests them C. Medications must be counted, handed to guardian, and receipt signed D. Keep a sample for staff documentation 10. What must staff do at the end of each shift for medication accountability? A. Hand off responsibility verbally B. Make a note if any meds were given

C. Verify and document medication counts and update records

D. Wait for the nurse to follow up the next day

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Staff Name:
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Supervisor Signature:

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#18 SELF CARE TRAINING QUIZ

1. What is the core definition of self-care in a residential treatment environment?

- A. Taking vacation time every three months
- B. Doing nice things for yourself as a reward
- C. Intentional action to preserve your mental, physical, and emotional well-being
 - D. Asking others to take over your shift

2. What is a common misconception about self-care that the training addresses?

- A. That it only works in clinical settings
- B. That it's too expensive for most staff
- C. That it's selfish, indulgent, or something you have to "earn"
 - D. That it's required by licensing rules

3. Which of the following are symptoms of compassion fatigue?

- A. Feeling excited to go to work and energized by youth interactions
 - B. Feeling emotionally numb and getting irritated quickly
 - C. Increased ability to multitask under stress
 - D. Experiencing more joy in helping others

4. What is "vicarious trauma," as defined in the module?

- A. Trauma experienced firsthand by staff
- B. Burnout caused by physical exhaustion
- C. Internalizing the trauma stories of others, leading to symptoms like hypervigilance or intrusive thoughts
 - D. Staff members copying each other's unhealthy behavior

5. Which of the following are two of the five self-care domains covered in the training?

- A. Financial and Academic
 - B. Dietary and Marital
 - C. Physical and Spiritual
- D. Occupational and Environmental

6. What is the purpose of the "burn book" journaling technique?

- A. To document youth behaviors for reports
- B. To write raw emotions down and then tear them up as a release
 - C. To shame yourself into doing better
 - D. To track staff performance

7. What is a tactical break, and why is it useful?

A. A scheduled smoke break

B. A full day off to regroup

C. A brief action like refilling your water or stepping away to regulate before burnout hits

D. A bathroom break taken with other staff

8. Why should self-care and staff wellness be discussed during supervision check-ins?

A. It shows staff you are evaluating their weaknesses
B. It gives supervisors something to write in performance reviews
C. It normalizes the importance of mental health and helps catch burnout early
D. It is a licensing requirement

9. If a staff member checks four or more symptoms on the burnout checklist, what does the module recommend?

A. Take a sick day and sleep it off
B. Ignore it—it's probably temporary
C. Talk to someone, make changes, and don't ignore the red flags
D. Quit your job immediately

10. How does the statement "You are not responsible for fixing everyone" relate to boundaries?

A. It reminds staff they should never get involved
B. It justifies doing the bare minimum
C. It helps staff understand that their job is to show up consistently—not to solve every issue

D. It allows staff to assign all tasks to others

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Staff Name:
Date:
Supervisor Signature:

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#19 TIC PLAN TRAINING QUIZ

1. What is the primary model of organizational change used by the Daisy Center to support trauma-informed care?

A. Prochaska's Stages of Change Model

B. Daisy Model focusing on flexibility, communication, and empowerment

C. Lewin's Change Management Model

D. Maslow's Hierarchy of Needs

2. What does the annual TIC training for leadership at the Daisy Center include?

A. CPR certification and nutrition education

B. Basic safety protocols and physical restraint training

C. A 4-hour foundational course, TIC policies, CLAS standards, and trauma screening tools

D. Only orientation shadowing with peer mentoring

3. How has the Daisy Center aligned its mission and philosophy with traumainformed care (TIC)?

A. By reducing direct therapy hours and hiring more security

B. By revising the mission, holding advisory board meetings, and eliminating restraints

C. By focusing on academic outcomes over emotional care

D. By increasing physical intervention techniques

4. What method is used at the Daisy Center to evaluate potentially retraumatizing policies?

A. Random staff interviews

B. Annual reviews using surveys, incident data, and youth debriefs

C. Board-only review without youth input

D. Weekly lockdown drills

5. How does the Daisy Center ensure cultural competency, equity, diversity, and inclusion (EDI)?

A. By only hiring bilingual staff

B. Through annual staff training, culturally tailored interventions, and use of EDIaligned policies (T-2, T-10, D-31)

C. By hosting holiday parties

D. By removing youth from different cultural backgrounds from shared programming

6. Which of the following are part of the Daisy Center's implementation of CLAS standards? (Select the most accurate answer)

A. Only translating the intake packet

B. Offering in-person interpreters only

C. Using CANS tools, translated handbooks, bilingual staff, and Sign Language AI
D. Limiting cultural support to Hispanic youth only

7. How does the Daisy Center support ongoing staff competency after initial orientation?

A. Mandatory weekly physical drills

B. 20+ hours of continued training, role-play, evaluations, and in-service workshops

C. Allowing staff to self-report training needs

D. One-time annual refresher video

8. In what ways are clients and families involved in treatment planning at the Daisy Center?

A. They are not involved to preserve clinical boundaries

B. Only through court-mandated appearances

C. They set weekly goals, give feedback, and attend family therapy

D. Families are allowed phone calls but no say in treatment

9. When is a youth's trauma history assessed and integrated into their treatment plan?

A. Within the first month, using peer interviews

B. Within 72 hours of intake through family interviews, safety plans, and CANS

C. After the youth exhibits aggression

D. At discharge only

10. What are some non-physical interventions used to reduce seclusion and restraint at the Daisy Center?

A. Time-outs and loss of privileges

B. Physical holds followed by reward incentives

C. Grounding, music therapy, sensory tools, and staff/youth debriefings

D. Assigning roommates and peer accountability checks

I confirm that I have completed the Medication Training and watched the required video.
Staff Name:
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Supervisor Signature:

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#20 SAFETY PLANNING TRAINING QUIZ

1. When should a Safety Plan be developed? 2 options

- A. After the youth's first therapy session
 - B. Only after a crisis occurs
 - C. Upon admission to the facility
 - D. When a youth turns 18

2. What is the primary purpose of a Safety Plan?

- A. To track daily schedules
- B. To serve as a tool for emotional regulation and crisis prevention
 - C. To document behavioral incidents
 - D. To manage medication timing

3. How often should a Safety Plan be updated? 2 options

- A. Every 90 days regardless of behavior
 - B. Only during team reviews
 - C. After crisis events or as needed
 - D. When requested by guardians

4. What is included in a Trauma Screen Report?

- A. School performance and hygiene routines
- B. Peer relationships and social media activity
 - C. History of traumatic events and triggers
- D. Medication side effects and food preferences

5. What is a key strategy for de-escalating a crisis?

- A. Enforce quiet time and restrict privileges
- B. Give the youth space and offer choices
- C. Remove the youth from their room immediately
 - D. Raise your voice to establish authority

confirm that I have completed the Safety Plan Training and watched the required video.
Staff Name:
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Supervisor Signature:

#21 DEBRIEFING TRAINING QUIZ

1. What are the immediate actions a trusted staff member should take when a youth experiences a trauma-inducing event?

A. Immediately isolate the youth and file a behavior referral

- B. Document the youth's hygiene status and notify medical staff only
 - C. Wait for the youth to request help before intervening
- D. Speak with the youth once calm, complete reports, document somatic responses, and notify oncall

2. Why is it important to notify the on-call worker after a trauma-inducing event?

- A. They are required to contact licensing for all incidents
- B. They assist with intervention steps and ensure follow-up support
 - C. They are responsible for all meal preparation post-incident
 - D. They need to collect staff statements for personnel files

3. What are the key aspects youth counselors must focus on in their ongoing support of a youth after an incident?

- A. Review house rules and schedule consequences
- B. Provide emotional validation, discuss coping strategies, and support safety improvements
 - C. Encourage group isolation until youth is ready
 - D. Shift focus to the peer group's response

4. What are two primary purposes of the debriefing process at the Daisy Center?

- A. Deliver punishment and document non-compliance
 - B. Evaluate team morale and redistribute staffing
- C. Help youth process trauma and improve staff responses
 - D. Notify police and remove youth from activities

5. What specific information should the Supervisor document on the De-Briefing Form?

- A. Youth bedtime and snack preference
- B. Triggers, youth responses, intervention methods, and required follow-up
 - C. Daily medication list and school notes
 - D. Staff attendance and disciplinary logs

6. How does the Daisy Center Supervisor engage with the youth after a crisis to enhance their well-being?

- A. Offers redirection, enforces room time, and limits peer contact
- B. Facilitates structured discussion, provides reassurance, and ensures emotional support
 - C. Assigns writing tasks and behavior logs
 - D. Removes privileges and focuses on consequences

7. When should families be contacted following a trauma-inducing event, and why is it important?

- A. Only if there is property damage involved
- B. After 48 hours, to allow the youth to calm
- C. Promptly, to maintain transparency and support recovery
 - D. Only during business hours the following week

8. What occurs during the post-debriefing review, and why is it essential?

- A. Incident is closed and filed away for record-keeping only
 - B. Peers evaluate each other's behavior
- C. Staff actions are reviewed, improvements discussed, and response protocols refined

	D. Parents are asked to conduct their own nome-based follow-up
	9. Where are all debriefing forms stored, and how are they used?
	A. Staff's personal folders for review
	B. Medical cabinet, used during audits
	C. Locked HR file and shredded after 30 days
	D. In the De-Briefing Book for policy adjustments and accountability
Staff Name:	Date:
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#22 FAMILY ENGAGEMENT TRAINING QUIZ

#23 SLACK NOTES TRAINING QUIZ

1. What is the primary purpose of progress notes in youth documentation?

A. To track shift schedules and chores completed
B. To record youth progress, assist clinical decision-making, and maintain compliance

- C. To share updates with youth's peers
- D. To report missed meals and activities

2. Which three elements must be included in a progress note?

- A. Youth's opinion, meal rating, and favorite staff
- B. Date/time, observations, interventions used, treatment changes, activites including calls made
 - C. General mood, staff opinion, and activity list
 - D. Therapist name, roommate names, and hygiene status

3. Why is it important to use objective language in documentation?

- A. It makes the notes easier to read for parents
 - B. It allows more personal expression
- C. It prevents bias and ensures factual, accurate records
 - D. It speeds up the writing process

4. When should staff complete progress notes?

- A. At the end of the week
- B. After youth check out
- C. at the end of every shift
- D. Only if the shift lead requests it

5. Which situation requires a House Incident Report?

- A. Youth had a low energy day
- B. Youth engaged in property damage or aggressive behaviorC. Youth skipped lunch
 - D. Youth asked for extra chores

6. What should be included when documenting an incident?

- A. Youth's story and favorite staff reaction
- B. Event details, involved parties, staff actions, and follow-up
 - C. Only names of those who witnessed it
 - D. A summary of the youth's past behavior

7. How can staff ensure their documentation is accurate and professional?

- A. Keep it brief and subjective
- B. Write late to ensure details settle

- C. Use assumptions to fill in gaps D. Be concise, avoid assumptions, and fill all required fields 8. Why is timely documentation critical in a residential facility? A. So paperwork is done before inspections
- B. It helps avoid gossip and confusion C. Delayed documentation leads to missing or inaccurate information
 - D. It keeps staff from being held responsible
 - 9. What are the risks of incomplete or delayed progress notes?
 - A. Parents might misunderstand treatment
 - B. Youth may get upset reading it
 - C. Treatment decisions and audits may be negatively impacted D. Staff may receive extra tasks
 - 10. What should staff do if they realize they've made an error in documentation?
 - A. Erase it and rewrite the section
 - B. Cross it out with no explanation
 - C. Follow facility guidelines for correcting documentation
 - D. Ignore it unless someone notices

I confirm that I have completed the Progress Notes Training and watched the required video.
video.
Staff Name:
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Supervisor Signature:

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#24 ROOM SEARCHES TRAINING QUIZ

1. When should a room search be conducted?

- A. During shift change
- B. When a youth is being discharged
- C. When contraband is suspected or youth expresses self-harm ideas
 - D. Randomly every morning

2. How many staff members should be present during a room search?

- A. Only one is necessary
- B. Two staff members whenever possible
 - C. Three or more to restrain youth
 - D. Any available staff and a youth peer

3. What is NOT allowed during a body search?

- A. Asking youth to remove shoes
 - B. Using a metal detector
- C. Strip searches or any physical contact
 - D. Asking youth to empty their pockets

4. Where should the search documentation be stored?

- A. In the staff communication log
 - B. In the youth's medical file
- C. In the youth's personal belongings bin
 - D. In the youth's file

5. What should staff do if contraband is found during a search?

- A. Place it on the youth's bed for review
- B. Return it to the youth after a warning
- C. Secure it, notify on-call staff, and document the findings
 - D. Store it in a general storage area

6. Which of the following are examples of contraband that must be confiscated?

- A. Personal journals, photos, and family letters
 - B. Snacks and hygiene products
 - C. Drugs, weapons, and gang-related items
 - D. School books and pencils

7. What steps should staff take if a youth refuses to comply with a search?

- A. Force the youth to comply using physical redirection
 B. Ignore it unless repeated
- C. Document the refusal and contact a supervisor for guidance D. Allow the youth to conduct the search on their own
 - 8. Why are strip searches prohibited at the Daisy Center?
 - A. They take too much time
 - B. They are not effective
 - C. They violate youth dignity and are unnecessary for safety
 - D. They are allowed only in emergencies

9. How does documenting searches help ensure safety and compliance?

A. It gives staff more authority

- B. It creates paperwork for shift change
- C. It ensures accountability, transparency, and adherence to policy
 D. It helps staff remember who caused problems

I confirm that I have completed the Searches Training and watched the required video.
Staff Name:
Date:
Supervisor Signature:

#25 Daisy Center Runaway Reporting Quiz

1. When is a youth considered a runaway at the Daisy Center?

- A. When they argue with staff
- B. When they leave the facility without permission or are unaccounted for over a certain timeframe
- C. When they don't want to participate in programming
- D. When they refuse medication

2. What is the correct response if a youth expresses intent to run and leaves the home?

- A. Physically stop them from leaving
- B. Call the youth's parents immediately
- C. Use de-escalation strategies and allow them to leave without physical intervention
- D. Follow them in your car to ensure safety

3. Which of the following is not part of the immediate response steps when a youth runs?

- A. Contacting the on-call person
- B. Posting the youth's picture on social media
- C. Notifying the youth's caseworker or Child's Hotline
- D. Calling the police with the youth's critical information

4. What critical information should staff be ready to provide to the police?

- A. Youth's social media handles
- B. Youth's academic grades
- C. Date of birth, hair color, meds, danger status, clothing, and case number
- D. Staff shift notes from the past month

5. After how many hours must a CIR and National Center for Missing & Exploited Children report be initiated if the youth hasn't returned?

- A. 12 hours
- B. 24 hours
- C. 48 hours
- D. 72 hours

6. What happens if the youth is gone for over seven days?

- A. The Daisy Center continues holding the bed indefinitely
- B. The youth's placement is discharged, and readmittance may be denied
- C. The youth is automatically transferred to another facility
- D. Staff are instructed to stop documentation

7. What should staff do if a youth returns on their own?

- A. Wait for the next shift to handle it
- B. Skip police contact if it's been less than 24 hours
- C. Contact Grand Junction PD to cancel the runaway report and complete all documentation
- D. Immediately call a team meeting

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Date:		
Supervisor Signature:		

#26 INTAKE ASSESSMENT TRAINING QUIZ
1. What are the seven steps in the Admission Process?
A. Orientation, Rules Review, Risk Assessment, Peer Interview, Therapist Intro, Parent Call, Exit Plan
B. Arrival Greeting, Room Assignment, Icebreaker, Tour, Peer Support Match, Guardian
Notification, Meal Plan
C. Collect Info, Family History, Risk Assessment, Social Development, Academic Planning,
Health & Well-being, Stabilization Plan
D. Documentation, Security Screening, Peer History, Emotional Check-In, Education Intake,
Health Exam, Exit Prep
2. Why is cultural background information important?
A. It satisfies state paperwork requirements
B. It helps tailor interventions to youth's needs and values
C. It allows staff to assign chores more appropriately
D. It determines youth dietary restrictions
3. What is the purpose of the stabilization plan?
A. To track staff shift duties
B. To reduce parental involvement
C. To ensure youth safety and emotional regulation during adjustment
D. To identify community resources
4. Which of the following are examples of risk factors assessed?
A. Self-harm, aggression, and trauma history
B. Height, weight, and screen time
C. Religious beliefs, favorite foods, and hair color
D. Eye color, nail hygiene, and musical taste
5. What are two areas assessed within Health & Personal Well-being?
A. Bedtime routine and friend preferences
B. Clothing choices and TV shows
C. Medication needs & allergies, hygiene & personal care habits
D. GPA and school start time
6. Why is academic and vocational planning important?
A. It helps assign classroom seating
B. It ensures youth access to education and career development
C. It fills time on the schedule
D. It tracks youth social behavior
7. What does 'IEP' stand for and why is it relevant?
A. Individual Emotional Profile – tracks emotional IQ
B. Internal Education Placement – for private schooling
C. Individualized Education Plan – supports youth with special education needs
D. Integrated Evaluation Process – used during court hearings
8. What are three assessments required in the 72-Hour Assessment?
A. Art style, favorite game, sleep posture
B. Behavioral, health, and social development
C. Spiritual, exercise, and snack preferences
D. Media use, daily fashion, and selfie count

- 9. What does the GAD-7 anxiety assessment measure and how is it scored?
 - A. Self-harm risk low, moderate, high
 - B. Mood disorders daily, weekly, monthly
 - C. Anxiety severity mild, moderate, severe
 - D. Academic knowledge pass/fail
 - 10. What does the SMART goal model stand for?
 - A. Simple, Marketable, Active, Real, Timed
 - B. Specific, Measurable, Achievable, Relevant, Time-bound
 - C. Safe, Mental, Age-based, Reasonable, Trackable
 - D. School-based, Motivated, Accountable, Realistic, Timely

Staff Acknowledgment

I confirm that I have completed the Therapeutic Assessment Training and watched the required video.

Staff Name:	 	 	-
Date:	 _		
Supervisor Signature:			

#27 TRANSPORTATION TRAINING QUIZ

What are the essential items that every Daisy Center vehicle must be equipped with?

- A. Car manual, youth schedule, snacks, phone charger
- B. First aid kit, fire extinguisher, seat belts, and Naloxone
 - C. Extra clothes, maps, youth behavior log, clipboard
 - D. Blankets, toolbox, and radio

2. What documentation must be on file for every youth being transported by the Daisy Center?

- A. Daily journal, snack preferences, staff notes
- B. Social history, hygiene plan, backpack contents
- C. Youth approval for transportation, emergency contacts, and medical needs
 - D. Medication chart and weekly schedule

3. What are the key elements of a pre-trip safety check?

- A. Clean windows, working radio, AC, and music playlist
 - B. Cell phone charge, staff ID badge, and spare keys
- C. Tire pressure, fluid levels, seat belts, and emergency equipment
 - D. Youth attendance list, lunchbox check, and map routing

4. What are the minimum requirements for an individual to be approved to drive Daisy Center vehicles?

- A. Over 18, has car insurance, and owns a vehicle
- B. Good attitude and at least one year of experience
- C. Approved driver, valid driver's license, and policy adherence
 - D. Able to drive standard transmission and pass a physical

5. What is the primary guideline for using personal vehicles to transport youth?

- A. Use only for short trips under 5 miles
- B. Never use personal vehicles under any condition
 - C. Allowed if you sign a waiver form
- D. Personal vehicles may not be used without prior approval

6. What is the first action to take in a transportation emergency?

- A. Drive quickly to the nearest hospital
 - B. Call a friend for advice
- C. Pull over to a safe location and call 911 if needed
 - D. Keep driving until you reach your destination

7. How should staff respond to a medical emergency during transportation?

- A. Wait until arrival at the destination to assess
- B. Follow first aid and CPR protocols and contact emergency services
 - C. Record vitals and notify staff once back
 - D. Let peers help and observe

8. What are the seat belt requirements in Daisy Center vehicles?

- A. Only staff must wear seat belts
- B. Only youth under 12 wear seat belts
- C. Seat belts are required only during long trips
- D. All passengers must wear seat belts at all times

9. What must happen before a visitor is allowed to transport a youth from the Daisy Center?

- A. The youth gives verbal permission
 - B. The visitor arrives on time

C. Pre-approval and proper documentation must be on file	е
D. The visitor signs in at the front desk	

10. What safety measure has the Daisy Center added for substance-related emergencies?

A. Random vehicle drug testing

- B. Emergency substance use hotline
- C. Naloxone must be available in facility vehicles
 - D. Weekly substance checks in rooms

I confirm that I have completed the Transportation Training and watched the required video.
Staff Name:
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Supervisor Signature:

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#28 SPECILIZED DISORDERS TRAINING QUIZ

1. What is a key difference in social interaction challenges between a youth with ASD and a youth with RAD?

A) Youth with ASD have been abused, while RAD youth have not

- B) Youth with ASD struggle with interpreting social cues due to neurodevelopmental delays, while RAD youth have attachment-related behavior rooted in neglect or instability
 - C) RAD youth avoid all social interaction, ASD youth are overly friendly
 - D) RAD is genetic, ASD is not

2. What might be an early stress signal in a youth with ASD, and how should a youth counselor respond?

A) Shouting loudly; send them outside alone

- B) Pacing or scripting; offer space or a calm-down tool like a weighted blanket
 - C) Laughing excessively; restrict them from activities
 - D) Ignoring instructions; raise your voice to gain attention

3. Why are consistency and predictability essential when working with a youth with Reactive Attachment Disorder (RAD)?

- A) To help the youth develop academic skills
 - B) To reduce the workload of caregivers
- C) To build trust and a sense of safety in youth who experienced unstable caregiving
 - D) To prepare them for legal adoption

4. A youth with Bipolar Disorder is in a manic state. What should a youth counselor avoid doing?

- A) Offering a low-stimulation space
- B) Reinforcing their grandiose or unrealistic ideas
 - C) Monitoring their sleep patterns
- D) Using grounding phrases to help them slow down

5. How does DBT help youth with Borderline Personality Disorder (BPD)?

- A) It teaches them to avoid emotions entirely
 - B) It rewards them for being compliant
 - C) It focuses on discipline and obedience
- D) It teaches distress tolerance and emotional regulation skills to manage intense feelings

6. What is an example of a "when/then" statement for a youth with Oppositional Defiant Disorder (ODD)?

A) "Do what I said or you lose everything."

- B) "When you finish tidying your room, then you can play video games."
 - C) "You better do this now!"
 - D) "I told you three times already!"

7. In the context of BPD, what does "splitting" refer to and what is important for staff to do?

A) When youth physically leave staff; staff should use restraint

B) When youth talk to themselves; staff should correct it immediately

- C) When youth idealize some staff and devalue others; staff must remain united and avoid taking sides
 - D) When youth refuse therapy; staff should isolate them until compliant
- 8. During a depressive episode in a youth with Bipolar Disorder, what is an appropriate youth counselor response?
 - A) Push them to talk until they open up
 - B) Demand they participate in a high-energy activity
- C) Sit quietly with them and validate their experience, offering gentle low-energy choices

 D) Leave them alone for the entire day
- 9. Why is it better to engage a youth with ASD through shared activities instead of direct social pressure?
 - A) Because ASD youth don't need social interaction
 - B) To reinforce that adults are in control
 - C) Because shared activities allow low-pressure connection that respects sensory/social preferences
 - D) Because they're too distracted to communicate otherwise

10. A youth with RAD is pushing away a caregiver. What is a critical mindset for the caregiver?

- A) Take it personally and confront the behavior
 - B) Immediately change the staff rotation
- C) Understand it's a test of abandonment fear and remain calm and consistent
 - D) Ignore the youth for the rest of the day

I confirm that I have completed the Trauma Prevention Training and watched the required
video.
Staff Name:

Date:	
Supervisor Signature:	

#29 STAFF ORIENTATION QUIZ

During the probationary period, when are new employees at the Daisy Center evaluated?

A) After 60 and 120 days
B) Only at the end of 90 days
C) At 30 days, 90 days, and then annually
D) Weekly for the first two months

2. What is the policy for Youth Counselor use of personal cell phones?

A) They may use them anytime as long as youth are not present
B) They must leave them in their cars during shifts
C) They must keep them in the office and only use during breaks
D) Staff can carry phones if they're set to silent

3. Which of the following is NOT one of the required annual training or certification items for staff?

A) CPR recertification
B) Review of Abuse and Neglect Policies
C) Review of Daisy Policies and Procedures
D) 8 hours of yoga training

4. What are the expectations for staff room and bed checks?

A) Conducted only at bedtime and after meals

B) Every 15 minutes with verbal check-ins only

C) Every 30 minutes at random times with documentation; daily room searches and chore checks on day shift

D) Done only when youth are in crisis or on reset

5. If a staff member is sick and cannot work, what must they do?

A) Notify HR by email and stay home

B) Notify on-call and attempt to find coverage; if unable, on-call will assist

C) Simply call in and skip the shift

D) Post in the staff group chat and wait for a response

6. What is the consequence when a youth causes property damage?

A) Suspension from privileges for one week

B) Immediate isolation from peers

C) Youth helps with repair, pays through allowance, writes an apology, and completes therapeutic worksheets

D) Youth is removed from the program

7. What behavior typically leads to a Standard Reset?

A) Sleeping in past 8:00 AM

B) Skipping one group session

C) Repeated refusal, unsafe boundaries, peer involvement, or running
D) Asking for multiple snack breaks

- 8. When is Therapeutic Group held on weekdays and what is its purpose?
 - A) Monday-Wednesday at 3:00 PM for yoga and stretching
 - B) Monday–Wednesday at 4:00 PM for healing, support, and skill-building
 C) Daily at 6:00 PM for journaling
 - D) Tuesday-Thursday at 5:00 PM for chores and reflection
 - 9. On weekends, when are youth allowed to use electronics?
 - A) 10:00 AM to 12:00 PM only
 - B) After group therapy only
 - C) 11:00 AM–12:00 PM and 4:00–6:00 PM, after completing rooms and chores D) 3:00–9:00 PM with no restrictions
 - 10. What is the Daisy Center's policy on youth meal options?
 - A) Youth must finish every meal or forfeit snack privileges
 - B) Youth can eat what they want when they want
- C) Youth are encouraged to try three bites, and can ask for leftovers or PB&J with milk if they dislike the meal
 - D) Youth are required to eat school meals only

I confirm that I have completed the Trauma Prevention Training and watched the required
video.

Staff Name:	 	 -
Date:		
Supervisor Signature:		



Date: _____

Supervisor Signature:

#30 STATE POLICIES TRAINING QUIZ

1. What is one requirement for a facility to be considered a QRTP?
A) It must serve only children under 12 years old
B) It must be accredited and use a trauma-informed treatment model
C) It must be located in a hospital setting
D) It must only accept voluntary placements
2. How often must a QRTP submit their Quality Improvement (QI) plan reviews?
A) Monthly
B) Bi-annually
C) Quarterly
D) Every 90 days
3. What is required regarding clinical staff supervision in QRTPs?
 A) No supervision is needed if the staff is licensed
B) Supervision is optional unless issues arise
C) Weekly supervision for provisionally licensed staff
D) Supervision must be conducted monthly for all staff
4. Which of the following is true regarding family engagement in QRTPs?
A) Contact is only required if ordered by court
B) Documentation is not required unless issues arise
C) Family contact is considered an optional intervention
D) QRTPs must document all efforts to facilitate family contact
5. When must the Individual Child's/Youth's Plan (ICP) be completed?
A) Within 30 days of admission
B) Within 14 days after mental health services are needed
C) Immediately upon placement
D) Within 7 calendar days
6. Under what condition is physical restraint permitted in QRTPs?
A) When a youth refuses to follow directions
B) For repeated property destruction
C) Only in emergencies with imminent threat of bodily harm
D) As part of a treatment plan with parental consent
Staff Acknowledgment
confirm that I have completed the Trauma Prevention Training and watched the required video.
Staff Name: