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NCCHC CCHP-CP

**NCCHC Certified Correctional Health Professional -
Clinical Provider**



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Question: 1

A facility asks health services to conduct rounds in its restrictive housing unit. A clinician asks what the purpose of these rounds is, since custody has already determined the placements. What is the most accurate description of the health services role?

- A. To identify patients whose health is deteriorating in that setting and to communicate clinical findings to custody.
- B. To determine whether each patient remains medically suitable for continued placement in the unit.
- C. To document that health staff have observed each patient, so that the facility can demonstrate oversight.
- D. To ensure that patients in the unit are receiving the medications and treatments previously ordered for them.

Answer: A

Question: 2

A man collapses in a prison yard. Health staff are notified and arrive at the perimeter of the yard, where an officer tells them the yard has not yet been secured and they must wait. What is the correct understanding of this instruction?

- A. The instruction indicates a failure of the emergency response plan that should be addressed after the event.
- B. Clinical urgency overrides the security assessment, so health staff should enter the yard immediately to reach the collapsed patient.
- C. Scene security is a custody determination that precedes health staff access, so responders wait while the response continues in parallel.
- D. Health staff should request that the patient be brought to the medical unit by responding officers instead.

Answer: C

Question: 3

A man with HIV maintained on antiretroviral therapy is scheduled for transfer to another facility in the same system in three days. His current regimen was established two years ago and he is virologically suppressed.

Which aspect of the transfer poses the greatest threat to his outcome, and should therefore drive the provider's planning?

- A. The receiving facility may use a different formulary, and could substitute an agent within the same class.
- B. The transfer screening at the receiving facility may not be performed by a clinician familiar with his history.
- C. His confidentiality may be compromised because transport staff will handle the paperwork accompanying him.
- D. An interruption in antiretroviral dosing during the transfer window can compromise durable virologic control.

Answer: D

Question: 4

A postpartum woman with an opioid use disorder, receiving treatment in custody and separated from her three-week-old infant, is released on a Friday afternoon. Her community appointment is the following Wednesday and she has been given a medication supply covering that interval. Which feature of this release plan most needs to change?

- A. The medication supply, which should extend beyond the appointment in case the community prescriber cannot see her.
- B. The five-day unsupported interval, which falls in the window when her risk of a fatal outcome is highest.
- C. The absence of a mental health linkage, given the elevated risk of postpartum mood disorder in this situation.
- D. The lack of any arrangement for contact with her infant, which is a major source of her distress.

Answer: B

Question: 5

A provider learns that a staff member told several men on a housing unit what a patient on that unit is being treated for. The patient has since asked to be moved and will not say why. What is the correct course?

- A. Handle it as a safety incident as well as a confidentiality breach.
- B. Support his request to move to another unit, since the disclosure cannot be undone and his safety is the immediate concern.
- C. Take it up with the staff member directly, since a single lapse is a training matter rather than an incident to be reported.
- D. Report it as a confidentiality breach through the facility's process, and tell the patient what the outcome was once the investigation into the staff member's conduct has been concluded.

Answer: A

Question: 6

A warden asks a provider to review the medical files of several men and to identify which of them have conditions that would make them unsuitable for a work assignment in the kitchen, and separately asks which of them are likely to be exaggerating their symptoms. How should the provider respond to these two requests?

- A. Answer both requests, since the warden has a legitimate operational interest in the reliability of health complaints.
- B. Provide the medical files to the warden so that the facility can make both determinations directly.
- C. Answer the work-suitability question through a clinical assessment, and decline the second as outside the clinical role.
- D. Decline both requests, since reviewing files for an administrative purpose falls outside the treatment relationship.

Answer: C

Question: 7

What is the fundamental reason that reportable disease obligations apply to correctional facilities in the same way as to community providers?

- A. The health department can provide facilities with treatment resources that they may not have on site.
- B. The population moves continuously between the facility and the community, so the two are one epidemiologic unit.
- C. Incarcerated populations carry a higher burden of communicable disease than the general population.
- D. Correctional facilities are licensed health care settings and are therefore subject to the same reporting rules.

Answer: B

Question: 8

Within correctional health care, what does the term special populations most usefully denote?

- A. Groups that require housing separate from general population, for reasons of safety or management.
- B. Groups whose conditions are managed by specialists rather than by the facility's primary care providers.
- C. Groups whose care requires adaptations that standard facility processes do not provide by default.

D. Groups that are legally recognised as protected, and are therefore entitled to specific accommodations.

Answer: C

Question: 9

During a respiratory illness outbreak, a facility administrator proposes suspending all sick call for two weeks so that clinic staff can be redirected to screening and testing on the housing units. How should the provider respond to this proposal?

- A. Support redeployment while preserving a pathway for patients whose ordinary health needs continue during the outbreak.
- B. Oppose the proposal, since access to care is a continuing obligation that an outbreak response cannot displace.
- C. Propose that sick call requests be triaged by nursing during the period so that only urgent cases are seen.
- D. Support the proposal, since containing transmission protects the whole population and takes precedence for a limited period.

Answer: A

Question: 10

A review of medication administration records shows a high rate of documented missed doses on one housing unit, concentrated in the early morning administration. Nursing staff report that the unit is often not ready for the medication line at the scheduled time. What does this pattern most likely represent?

- A. A documentation problem, since doses recorded as missed may have been administered and not charted.
- B. A patient refusal problem specific to that unit, which warrants investigation of why patients are declining.
- C. A staffing problem, since a single nurse may be unable to complete the administration round in the time available.
- D. A scheduling mismatch between health services and unit operations that is producing repeated therapeutic interruption.

Answer: D

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