



National Certification Council for Activity Professionals

Setting Standards of Excellence for Quality of Life through Education

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National Certification Council for Activity Professionals National Exam Study Guide

Congratulations on completing the Modular Education Program for Activity Professionals (MEPAP)! You are now eligible to take the NCCAP National Exam and well on your way to becoming a nationally-certified Activity Director.

NATIONAL EXAM

The NCCAP National Exam is a proctored exam taken at a 3rd Party testing site. To locate your nearest testing site, visit: www.comirateesting.com. Go to the “Locations” tab and then click on your State. Under “Please Choose Your Sponsor,” click on the link for the National Certification Council for Activity Professionals. Then, click on the link to the “NCCAP National Exam.” A list of approved test sites in your State will be listed.

Follow the directions on the test location website to make arrangements to take the NCCAP National Exam. Please bring government issued ID. Study materials are not allowed during the exam.

The NCCAP National Exam is 50 questions worth two points each. The test questions are all multiple-choice. There will be 25 questions from MEPAP Part I and 25 questions from MEPAP Part II.

You have two hours to complete the proctored exam and must pass with a score of 70%. You will know your unofficial results at the time you complete your exam. NCCAP will receive notice of your exam completion and will process your Certification or Level Change if you are eligible within 4-6 weeks.



STUDY GUIDE

This Study Guide is based on the MEPAP learning objectives covered in your course curriculum. This document is a helpful summary of key points to study.

The Activity Professional, Activity Profession and Work Settings

Lesson Objectives:

- The student will demonstrate accepted standards for professional conduct.
- The student will apply three strategies for establishing and maintaining therapeutic relationships with clients/resident.
- The student will describe five different communication techniques with clients/residents with various disabilities and needs.

Definitions:

Leisure: Independent use of free time.

Recreation: Activity that refreshes the body or mind - structured and organized.

Continuum of Care: Levels of care beginning with care and support at home, care provided in the community such as adult day centers and institutional care through assisted living and skilled nursing facilities.

Chain of Command: A clear and distinct line of authority among the positions in an organization.

Organizational Chart: A visual picture of the organization that identifies lines of communication and authority.

Authority: The power and right to make decisions.

Accountability: To be responsible for something, to have to answer to an authority.

Responsibility: A duty that is assigned to an individual or a duty one accepts.

Departmentalization: Basis for grouping of positions into departments and departments into the organization.



Profession: An individual with specialized skills and abilities working in his or her area of experience.

Professionalism: The qualities or traits that mark a person working in a particular profession.

Certification: A credential indicating specific training in a career specialty. Certification of choice for activity professionals is through NCCAP which is recognized in many states and Federal regulations.

Professional Organizations: Nonprofit organization that works to improve the image, working conditions, and skill levels of people in particular occupations.

Advocacy: To act, speak, or write in support of an issue.

Protesting: To object, complain or disagree with something.

Activism: The practice of pursuing political or other goals through vigorous action, often including protests and demonstrations.

Regulatory Requirements: A rule or directive made and maintained by an authority. State regulations are in place for nursing homes, medical day care centers and assisted living. Federal regulations are in place for nursing homes only.

Interpretive Guidelines: Publication to help nursing facilities follows the law and aid surveyors to enforce the law.

Survey Process: Methodology that the state/federal surveyors practice when inspecting care facilities.

Deficiency: In LTC, this is something the state surveyors find during a survey. It means the facility has not met the state or federal standards of care.

Plan of Correction: This is written by a care facility if a deficiency is issued. It describes how the care facility will fix the deficiency.

CMS: Center for Medicare and Medicaid Services. Federal agency overseeing skilled nursing facilities.



The Older Adult

Learning Objectives:

- The student will name and define the characteristics for three biological, sociological and psychological theories of aging.
- The student will be able to define ageism and events that bear negatively in aging.
- The student will be able to define physical symptoms and psycho-social characteristics of typical age-related disorders.
- The student will be able to define three neurological changes to the brain cells associated with Alzheimer's disease.
- The student will be able to differentiate three cognitive assessment scales and why they are used.
- The student will be able to respond to resident/client's feeling of loss and bereavement by identifying the stages of death and dying.

Definitions:

Life Course Perspective: How one experiences a timetable of life events, how society looks upon individual life choices.

Life Span: The greatest number of years a person can live.

Theories on Aging: Various theories as to why we age - two categories - genetic and wear and tear theories

Abraham Maslow: A psychologist who proposed the hierarchy of needs, with self-actualization as the ultimate psychological need. Humans have a hierarchy of needs ranging from lower-level needs for survival and safety to higher-level needs for intellectual achievement and finally self-actualization.

Erik Erickson: A psychologist who developed the theory involving eight stages of life. How one responded to life experiences in those stages would mold personality.

Elizabeth Kubler-Ross and Stages of Grief: A psychologist who studied death and dying. Her theory proposes that the terminally ill pass through a sequence of 5 stages: 1. denial, 2. anger/resentment, 3. bargaining 4. depression, and 5. Acceptance.

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Cohort Effect: The consequences of having been born in a given year and having grown up during a particular time period with its own unique pressures, problems, challenges, and opportunities.

Cumulative Disadvantage: The idea that the negative effects of patterns of inequality in wealth, status, and availability of opportunities accumulate over the life span.

Social Clock: The culturally preferred timing of social events such as marriage, parenthood, and retirement.

Social Gerontology: A subfield of gerontology with an emphasis on social rather than physical aspects of aging.

Functional Age: Actual competence and performance of an older adult, as distinguished from chronological age.

Wellness: An overall state of well-being or total health.

Palliative Care: Care provided to those suffering from chronic and serious illness. Similar to hospice. While hospice is defined for those with less than six months to live, palliative care has no time frame.

Age Grades: Permanent age categories in a society through which people pass during the course of a lifetime.

Age Norms: Informal standards defining appropriate age and behavior for certain life events.

Professional Approaches to Care

Learning Objectives:

- The student will demonstrate accepted standards for professional conduct.
- The student will apply three strategies for establishing and maintaining therapeutic relationships with clients/resident.
- The student will describe five different communication techniques.

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Definitions:

Wellness Model: Includes 6 aspects: physical, intellectual, social, emotional, vocational and spiritual.

Medical Model: The concept that diseases have physical causes that can be diagnosed, treated, and, in most cases, cured.

Long term care Model: Continuous care over longer time.

Restorative Model: Program based on restoring each patients function level. Based on ADL's assessment made based on the individual capability to perform.

Metamessages: Underlying message of what is being said.

Autonomy: Ability or tendency to function independently.

Spirit of life: The force within the body that gives life energy and power.

Reality Orientation: Calendars, clocks, signs, and lists to help people with Alzheimer's disease remember who and where they are. Being oriented to people, location and time.

Remotivation therapy: Five step group process designed for individuals in a depressed state or in early stages of dementia. Utilizes real objects, stimulate senses, and encourages a new motivation for life, utilizing poems, pictures, animals, hobbies, group interaction.

Crystallized Intelligence: One's accumulated knowledge and verbal skills; tends to increase with age.

Fluid Intelligence: Capacity to learn new ways of solving problems. Reasoning skills, problem solving skills.

Culture Change: An ongoing transformation within long term care communities which is based on person directed values that restore control to the elder. Culture change models include the Eden Alternative and the Greenhouse Model.

Person Directed Care: The model of care which encourages the person to make decisions about services and care provided and more importantly that staff honor the person's wishes.

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Validation Therapy: Founded by Naomi Feil – an empathetic approach which focuses on accepting the resident/client where they are and joining their world.

Sensory stimulation: Using sensory cues to stimulate the senses in a logical and sensitive manner to generate some sort of emotional response.

Care Planning Practices

Learning Objectives:

- The student will define five reasons how clear documentation can impact on quality care.
- The student will be able to define quality of life and identify three indicators of quality of life.
- The student will be able to define the difference between interdisciplinary and multidisciplinary techniques.
- The student will identify three responsibilities of the activity professional while attending the interdisciplinary care plan meeting.
- The student will effectively apply and demonstrate the ability to assess the resident/client and carry the information through to the care plan.
- The student will recognize the distinct difference between care plan problem, goal and interventions.
- The student will list five elements of a thorough progress note.
- The student will be able to design activity approaches that support resident/client to achieve goals.
- The student will define the origins and rationale of the RAI, MDS, and CAA's.
- The student will demonstrate ability to conduct the Section F interview and analyze results.

Definitions:

Quality of Care: Providing care which meets individual needs and also attains or maintains the highest practical physical, mental and psychosocial wellbeing. Includes maintaining or improving activities of daily living.



Quality of Life: The perspective of each individual which includes their attitude and values associated with things (family, friends, interests, spirituality, etc.) that make an individual happy and satisfied.

Activities of Daily Living: Self-care activities that a person must perform every day – such as eating, dressing, bathing and using a toilet.

Instrumental Activities of Daily Living: The tasks associated with living independently such as shopping, cooking, cleaning the home.

Functional ability: One's ability to complete basic tasks - functions to get through one's day.

Accurate Care: This is care that is based on individualized assessments. The combined assessments of the care team and the interdisciplinary meeting will allow more integrated assessment information which will lead to more accurate care.

Dignity: Being treated and cared for with respect to the person's individual needs and interests.

Self Determination: The person's right to choose activities, schedules and health care activities consistent with their interests, assessment and plans of care. This is the individual's right to decide and make decisions.

Accommodation of Needs: Individuals needs and interests need to be taken into account in order to maintain independent functioning, dignity, well-being and self-determination. This is the care giver and community adapting to the person's needs rather than forcing person to adapt to care community schedules.

Physician's Orders: An order written by the physician which outlines the parameters of care, which may include activity participation.

Tally of Interest: The listing of resident/client interests within the initial assessment. Often represented by a checklist of interests.

Precautions: Specific aspects about the person which need to be considered in developing care plan so as not to cause death, harm, discomfort or negative outcomes. Some precautions may include diet restrictions, medical limitations, cognitive and physical deficits.



Initial Assessment: The process of collecting information (Physical, cognitive and psycho-social) about the person in order to develop an individualized plan of care.

RAI: Resident Assessment Instrument - Federal form. Made up of two parts - MDS and CAA.

MDS: Minimum Data Set - Federal assessment form used in nursing homes. Activities often completes section F.

CAA's: Care Area Assessments - Problem assessment tools - evaluates data collected in MDS.

CAT's: Care Area Triggers - Are specific resident responses for one or a combination of MDS elements. The triggers identify residents who have or are at risk for developing specific functional problems and require further assessment.

Care Plan: A written document which defines problems/needs and defines resident/client goals and staff interventions.

Care Plan Meeting: When the team gets together to discuss the written care plan. Families and residents/clients are sometimes invited. Conducted upon admission and every 90 days.

Goal: Something the resident/client will achieve - a behavior, action, or response.

SMART: Acronym for what a goal should be - specific, measurable, achievable, realistic and timed.

Intervention: Staff actions to assist the resident/client in achieving the defined goals. Should be individualized, realistic and specific.

Progress note: A note written on a quarterly basis to review the progress in meeting the defined goal.

Interdisciplinary Team: The professional team of staff who work together to address resident/client needs. Includes the nurse, activities, social worker, therapy, dietary and other staff involved in care.



Care Giving Practice

Learning Objectives:

- The student will demonstrate ability to create and individualize programs for the resident/client's functional level and interest.
- The student will be able to define the four stages of group process.
- The student will define the external and internal contributors to group success or lack of success.
- The student will be able to define specific groups or approaches which are appropriate for the person with Alzheimer's Disease, per each stage of the disease.
- The student will effectively adapt and approach to a resident/client's physical disability which will allow for the resident/client to participate with success.
- The student will construct a catalog of groups, based on physical, social, cognitive, intellectual, spiritual and affective domains.
- The student will be able to organize and implement a coordinated program which is focused on a specific programming theme

Definitions:

Group: Two or more people with a shared purpose. There are characteristics of group (shared purpose, interaction, identification) and stages of group process.

Leader: A person who is able to influence others to act.

1-1 Activity: An activity conducted between two people - the activity leader or volunteer and the resident/client.

Therapeutic Environment: Adapting the environment to the needs of the participants. It enables participants to feel comfortable and safe within the environment. It includes the physical environment and social environment.

Adaptation: To change the activity or approach to allow greater success and independence. Material adaptation (changing materials), procedural adaptation (changing the rules) or assembly line adaptation are specific types of adaptation.

Activity Analysis: A process to break down and examine an activity in order to find various characteristics that contribute to program objectives.

Resident Centered Program: Program which is focused on the needs and wants of the resident/client population.



Specialized Activity Program: Any activity program that is tailored to meet the needs of a special group. Sensory based programming, late afternoon relaxation groups and the 1-1 visit program are examples of specialized activity programs.

Philosophical Statement: A "belief" statement which guides the department - defines the values and attitudes of the service.

Programming outcomes of-

Empowerment: Activities that give resident/client control and decision-making ability such as Resident Council and leadership opportunities.

Maintenance: Activities that exercise day to day skills such as discussion groups, games, life skill programs, physical activities.

Supportive: Activities that provide comfort and support such as sensory, spiritual programs, 1-1.

Activity Service: System of Design, Development and Evaluation of Department Services

Learning Objectives:

- The student will define the elements and process of evaluation.
- The student will identify ten sources in the community which would enhance activity programming.
- The student will define the mission and definition of activities as defined by NAAP.
- The student will be able to identify a complete and thorough activity department policy and procedure manual.
- The student will identify the need for program evaluation and be able to locate evaluation systems within their own facility.
- The student will be able to identify information regarding program quality and resident/client satisfaction using an evaluation tool and approach.
- The student will define five ways volunteers can enhance quality of life for the resident/client.
- The student will recognize the tasks associated with each step-in volunteer management, including recruitment, orientation, training, supervision and recognition.

Definitions:

Program design: How the program is organized - focused on the needs, interests, abilities and desires of the population.



Protocols: A proper, acceptable and specific guidelines to complete certain tasks.

Standards of Practice: Guidelines for practice

Policy and Procedure: Written statements and guides for the department.

Program Evaluation: To judge and determine if the program is meeting the needs of the population.

Volunteer: One who freely makes him/herself available to assist in programming or 1-1 support to the residents/clients.

Volunteer recruitment: Methods to seek out volunteers. There is general recruitment (seeking any interested parties) and targeted recruitment (seeking specific people to assist with specific tasks).

Volunteer recognition: Means to recognize volunteers for their time dedicated to the facility. Volunteer recognition can happen daily with a simple thank you or formally with luncheons, pins and awards.

The Role of the Activity Manager

Learning Objectives:

- The student will be able to define management as a science and as an art, giving characteristics of each.
- The student will identify personal skills and strengths in their role as a manager, creating an action plan for the future.
- The student will define a major characteristic of three different management theories.
- The student will relate defined theories to actual management roles within their own facility.
- The student will be able to define the difference between being a manager and a leader.
- The student will define content and importance of vision and mission statements.
- The student will be able to identify five specific components of facility culture.
- The student will define the nature of conflict and three methods to manage conflict in a constructive way.

Definitions:

Manager: Someone who is in charge of the department or business.



Leadership: Practical skills and qualities which enable an individual to guide/influence the team or department.

Vision Statement: A statement which defines the future state of the organization.

Mission Statement: A statement which defines why the organization exists and the services provided.

Philosophy Statement: A statement of beliefs and values which direct the service.

Collaboration: The action to work together to produce something new.

Values: Something you hold in high regard, an enduring belief.

Conflict: Disagreement or argument based on opposing values, needs, or goals.

Workplace politics: The process and behavior in human interactions involving power and authority.

Corporate Culture: The attitudes, customs and expectations that guide how individuals interact and cooperate within an organization. Often shared by the majority of those within the organization.

Corporate Climate: Focuses more on the individual aspects of the organization such as leadership, organizational structure and communication.

Departmental Goals or Objectives: Statements to guide the department. Goals tend to be less exact or specific while objectives tend to be more exact and quantitative.

Ethics: Moral standard of conduct and behavior.

Beneficence vs. Maleficence: Beneficence is to do good. Maleficence is to cause harm. Preventing harm is basis for bio-ethics.

The Planning Function of Management

Learning Objectives:

- The student will relate three specific elements of planning as a management function.
- The student will be able to define the content of a strategic, operational and contingency plan.
- The student will define content and importance of departmental goals.
- The student will construct measurable goals for the activity department.

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- The student will organize the appropriate content of a departmental policy and procedure book.
- The student will describe the role that decision making plays in the planning function of management.
- The student will effectively be able to review departmental services, identify areas of concern and create a plan for remediation.
- The student will appraise the scope and management of finances within the department.

Definitions:

Strategic Plan: The organization's defining its future and plan to move forward.

Operational Plan: Duty of departmental managers – the day to day implementation of departmental goals and policies.

Contingency Plan: Having an alternate plan when things do not go as planned.

Policy: A broad written statement defining a course of action. They state what should be done.

Procedure: Systematic plans of actions that coordinate with policies. They identify the who, what, when and where of how the policies should be implemented.

Budget: A plan that projects how the business will allocate and spend money over a period of time to maintain its operation.

Operating Budget: Specific budgets defined to allow each area of the operation to run effectively. It defines the day to day operation of the service.

Capital Expense: Items that go beyond operational expenses and are used over a period of time.

The Organizing Function of Management

Learning Objectives:

- The student will define four principles of management organizing.
- The student will define the function and logic of organization.
- The student will define the purpose and steps of delegation.
- The student will apply the principles of functional organization to the management of the department.

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- The student will analyze the work of the department and organize the work by tasks.
- The student will analyze the current work tasks of each position and re-assign tasks as needed.

Definitions:

Organization: Two or more people working together to achieve a common goal.

Delegation: Thoughtfully assigning responsibilities and giving authority to complete the task.

Authority: The ability to make decisions.

Responsibility: Being assigned a duty to complete.

Accountability: Being held responsible for the outcome of the duty assigned.

Job Description: A detailed description of responsibilities related to a specific position.

Task Outline: Step by step directions to coordinate with procedures or protocols.

Matrix Organizational Chart: Defines the company **structure** in which the reporting relationships are set up as a grid, or matrix, rather than in the traditional hierarchy.

Line Organizational Chart: Authority is defined from the top down with clear lines defining responsibilities.

The Staffing Function of Management

Learning Objectives:

- The student will explain the theoretical framework of staffing and staff development.
- The student will describe the pitfalls and common misconceptions associated with hiring staff.
- The student will discuss the principles of staffing and staff development.
- The student will be able to create appropriate questions from specific job tasks.
- The student will define five components of a new employee orientation program.
- The student will be able to conduct a lawful and supportive performance appraisal.

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- The student will demonstrate methods to present an interesting presentation.
- The student will create an appropriate staff development program for their department.
- The student will list three characteristics of the adult learner.

Definitions:

Human Resource Planning: The ongoing, systematic process of managing human resources and ensuring the staffing needs of community are met.

Recruitment: The act of seeking out and inviting potential staff to work in the community.

Preliminary Screening: The initial action or interview to review basic qualifications and abilities of the candidate to determine their suitability for the position.

Interview: The formal meeting between the candidate and the employer with the intent to determine if the candidate holds the qualities and skills needed for the position.

Orientation: The process (both formal and informal) of introducing the new employee to facility practice, their job description and day to day responsibilities.

Salaried staff: Staff who draw a pre-determined salary and is not based on hours worked.

Per Diem staff: Staff who are “on call” and work as needed.

Hourly staff: Staff is paid an hourly wage and can be paid overtime.

Fringe benefit: Any extras beyond the regular paycheck and include health insurance, paid time off and pension.

Exempt vs. non-exempt employees: Non-exempt employees are entitled to overtime pay if they exceed their assigned hours. Exempt employees are exempt from overtime requirements. Exempt employees are often considered “white color” professionals and are not paid extra when working over the 40-hour work week.

In-service training: Formal training provided to staff to strengthen skills, improve areas of concern or introduce new technique.

Performance Appraisal: The formal process of reviewing and evaluating the employee’s work performance.



The Directing Function of Management

Learning Objectives:

- The student will identify important job factors which motivate the employee.
- The student will apply the management principle of directing and will learn the types of management behavior required for effective organizational functioning.
- The student will be able to develop and apply staff motivating guidelines.
- The student will coach effectively in job performance.
- The student will establish a work schedule which maximizes staff performance.
- The student will define the concepts of team leadership and how to apply them to their department.
- The student will be able to use a four-step process in identifying and solving problems.
- The student will be able to assess the dynamics of formal meetings

Definitions:

Motivation: The desire to do things.

Locus of Control: Refers to the extent to which individuals believe they can control events affecting them. Developed by Julian B. Rotter in 1954.

Team Building: Various activities which help develop a team atmosphere and relationships amongst employees.

Team: A group of people who work together in a motivated fashion.

Coaching (staff): Coaching is a form of employee training and development, introduced when there is a need to change the work situation or when poor performance indicates a need for additional training and guidance.

Directing: A process in which the managers instruct, guide and oversee the performance of the workers to achieve predetermined goals.

Communication Process: The process model of communication includes five parts.

The sender (person with something to say), the receiver (the person to hear the message) the message, the medium (the way the message was sent through non-verbal means) and feedback.



The Controlling Function of Management

Learning Objectives:

- The student will assess their organization's method of evaluation and be able to define three means of measurement.
- The student will define the terms associated with the management tasks of controlling.
- The student will be able to define clear standards which are used in the evaluation/measurement process.
- The student will effectively assess the program and its effectiveness in meeting the needs of the population served through the use of criteria, measurement systems and standards.
- The student will be able to evaluate departmental documentation to ensure it is meeting current standards and requirements.
- The student will demonstrate ability to guide staff, assist in regulating time, and managing the department to minimize facility risk.
- The student will evaluate their personal perspective of change and how it impacts on ensuring quality is met.

Definitions:

Quality Assurance: A process of evaluating a service to ensure the goals of the service are being met.

Total Quality Management: A philosophy of management which emphasizes that quality is an interdisciplinary process which continuously focuses on improving operations.

Continuous Quality Improvement: The practice of continuously evaluating and improving rather than reaching a plateau of quality or acceptance.

QAPI : Quality Assurance Performance Improvement which is a federally mandated quality assurance process for skilled nursing facilities.

Quality: degree of adherence to standards of good practice. How closely the outcome of the service meets the established standard.

Standards: Expectations established by the regulatory agencies, facility policy, professional organizations and certifying bodies and personal experience.

Norms and Expectations: Specific standards or definitions of what is to be found when conducting an evaluation or QA.



Measurement: Collecting data related to characteristics or expectations to determine if the standard was met in a QA study.

Judgement: Making a decision or drawing a conclusion from data collected.

Control: The management process of evaluating the service and determining if the outcomes meet the pre-defined standards or expectations.

Audit: A formal review of an area of service. Most commonly used with Chart Audit where the medical record is thoroughly reviewed for completeness and content.

Evaluate: The act of appraising something for its completeness or meeting expectations.

Action Plan: A written plan established to address areas of concern or substandard practice which may have been identified in an evaluative study or audit.

TEST PREPARATION TIPS

As you complete MEPAP I and II:

1. Immediately begin preparing for the exam by taking notes, mastering key concepts and staying organized.
2. Maintain consistent study habits by keeping up with reading and assignments.
3. Utilize study cards, Quizlet app (www.quizlet.com) or listen to topical lectures, according to your learning style.
4. Highlight key points in the reading.
5. Participate in study groups if available.

Before the exam:

6. Study for short periods of time rather than cramming the night before class. One can maintain a stronger attention span for 20-30 minutes combined with short breaks rather than trying to stay focused for extended periods of time.
7. Get a good night sleep the night before the exam.
8. Eat breakfast or a meal before the test.
9. Arrive at the exam site early.



While taking the test:

10. If experiencing symptoms of test anxiety, release physical anxiety through stretching or deep breathing and positive self-talk.
11. Read directions slowly and completely for the exam questions and follow carefully.
12. Identify key words, such as "all," "always," "never," "none," "not," "few," "many," "some," and "sometimes"
13. Read and respond to one question at a time, don't dwell on whole exam.
14. Move on to the next question if you don't immediately know the answer and go back to the Unanswered question later.
15. Don't expect to know everything and don't panic if there is a question you did not anticipate or prepare for. Use everything you know from the content of the course and your own reasoning ability to analyze the question and identify a logical answer.
16. Multiple choice questions: read the entire question before you look at the choices.
17. Don't make an uneducated guess. Use reasoning and to eliminate answers that are obviously incorrect to determine best answer.
18. Be sure to answer all questions and don't leave any blank answers.
19. Think twice before changing answers.
20. Take note of when you start the exam in order to pace yourself and plan completion time.
21. Allocate time to review the exam.

Thank you for your commitment to join over 150,000 NCCAP educated, trained and certified individuals who provide person-centered care to those we serve!