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## NAHQ Certified Professional in Healthcare Quality Examination Sample Questions (Q287-Q292):

### NEW QUESTION # 287

What is the first step in turning an organization's long-term goals into an operational plan for improvement?

- A. Select criteria to improve risk and cost.
- B. Determine a framework for improvement.
- C. Align priorities with the strategic plan.
- D. Decide what qualitative data to use.

**Answer: C**

Explanation:

Explanation: The first step in creating an operational plan is to align priorities with the strategic plan (D), ensuring improvement efforts support long-term goals. Frameworks (A), qualitative data (B), and risk/cost criteria (C) follow alignment. NAHQ emphasizes strategic alignment as the foundation.

NAHQ CPHQ Study Guide, Organizational Leadership Section, "Strategic Planning and Operational Alignment"; NAHQ Code of Practice, Principle 1: Organizational Leadership and Integration.

### NEW QUESTION # 288

An internal customer of the admission process in a skilled nursing facility is the

- **A. nurse completing the initial assessment.**
- B. patient's spouse and family.
- C. insurance company.
- D. patient being admitted.

**Answer: A**

Explanation:

An internal customer is someone within the organization who relies on the output of a process or service to perform their duties. In the context of a skilled nursing facility, the nurse completing the initial assessment is considered an internal customer of the admission process. The nurse depends on the accurate and timely completion of the admission process to assess the patient's condition and plan care accordingly.

\* Patient's spouse and family (A): They are external customers who interact with the facility but are not part of its internal processes.

\* Insurance company (C): This is an external entity involved in the payment process, not an internal customer.

\* Patient being admitted (D): The patient is the end-user of the services provided but is considered an external customer.

References

\* NAHQ Body of Knowledge: Customer Identification and Management

\* NAHQ CPHQ Exam Preparation Materials: Internal and External Customers in Healthcare

### NEW QUESTION # 289

A performance improvement project was initiated at the beginning of the flu season to increase the influenza vaccinations given in a pediatric clinic. The organization implemented a template to document patient influenza vaccine status and to offer the vaccine to any patients identified as not having been vaccinated. To evaluate and document the process improvement results over time, the quality professional should use which of the following?

- A. Matrix diagram
- **B. Control chart**
- C. Process decision program chart
- D. Force field analysis

**Answer: B**

Explanation:

To evaluate and document process improvement results over time, especially in monitoring the rate of influenza vaccinations in a pediatric clinic, a control chart (Option A) is the most appropriate tool. Control charts are statistical tools used to study how a process changes over time. They display data in a time-ordered sequence and help identify trends, shifts, or any variations that may indicate a problem within the process.

In this scenario, plotting the number or percentage of patients vaccinated over time on a control chart would allow the quality professional to:

\* Monitor Performance: Observe the vaccination rates throughout the flu season.

\* Detect Variations: Identify any unusual patterns or variations that may need further investigation.

\* Assess Impact: Evaluate the effectiveness of the implemented template in increasing vaccination rates.

The other tools listed are less suited for this purpose:

\* Matrix Diagram (Option B): Used to show relationships between different elements, but not for tracking performance over time.

\* Process Decision Program Chart (Option C): Helps anticipate potential problems in a plan and identify countermeasures, but does not monitor ongoing processes.

\* \*\*Force Field Analysis (Option D): Used to identify and analyze the forces driving and restraining change in a situation, but not for tracking data over time.

Therefore, a control chart is the most appropriate tool to evaluate and document the process improvement results in this context.  
References:

\* National Association for Healthcare Quality (NAHQ) - "Healthcare Quality Competency Framework" nahq.org

### NEW QUESTION # 290

For cheing the outcomes our focus of attention is blood pressure of patients with diabetes.  
Its criteria and standard can be respectively:

- A. Criterion: Percentage of post heart atta patients prescribed beta-bloers on discharge and Standard: At least 96% of heart atta patients receive a beta-bloer prescription on discharge
- B. Criterion: Percentage of patients with diabetes whose blood pressure is at or below 130/85 and Standard: At least 50% of patients with diabetes have blood pressure at or below 130/85
- C. Criterion: Sugar level in blood on daily basis and Standard: How many times sugar level rises and how many times it declines in a week
- D. None of these

**Answer: B**

### NEW QUESTION # 291

The primary purpose of a management information system is to:

- A. Provide information that facilitates management decisions.
- B. Provide data for quality assessment.
- C. Guarantee better coordination of organizational change.
- D. Computerize operations for greater effectiveness.

**Answer: A**

### NEW QUESTION # 292

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