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## CPHQ Practice Exam Questions with Correct Answers.

When considering the use of an external subject matter expert (SME), which of the following is most critical?

- A. leadership's personal preference
  - B. geographic location of the SME
  - C. cost of the SME's services
  - D. references of the SME - **Correct answer**
- D. references of the SME  
The positive clinical reputation provides credibility support to the project.

To avoid misinterpreting variances, which of the following statistical tools should be used?

- A. control chart
  - B. fishbone diagram
  - C. force field analysis
  - D. Pareto chart analysis - **Correct answer**
- A. control chart  
Control charts exhibit points between control limits, therefore displaying the variation.

An operating room circulating nurse reported that the instrument count indicated a missing clamp. X-ray findings were negative, and the patient showed no adverse effects. This occurrence is an example of which of the following?

- A. claims management
  - B. malpractice
  - C. clinical incompetency
  - D. potentially compensable event - **Correct answer**
- D. potentially compensable event

Although the clamp was not found, this has potential to become a compensable event. A potentially compensable event is an event for which there is risk of future claim or settlement.

Training is being determined based on treatment record review results. The following weighted results are available: Based on these results, which of the following areas should take priority for training? (Image missing)

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The CPHQ exam is a globally recognized certification that measures the candidate's knowledge and skills in healthcare quality management. Certified Professional in Healthcare Quality Examination certification is essential for healthcare quality professionals seeking to advance their careers and improve patient care. The CPHQ Exam covers a wide range of topics and is designed to evaluate the candidate's understanding of healthcare quality management principles and practices.

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## NAHQ Certified Professional in Healthcare Quality Examination Sample Questions (Q179-Q184):

### NEW QUESTION # 179

A department director has been asked to compare the productivity of the department with the productivity of similar departments at other facilities. Which of the following is the first step of this project?

- A. Conduct a search on the Internet for guidelines.
- B. Monitor the work flow in the department for at least six months.
- C. Determine which processes will be evaluated.
- D. Review department Job descriptions with another facility of similar size.

**Answer: C**

Explanation:

When comparing the productivity of a department with similar departments at other facilities, the first step is to determine which processes will be evaluated<sup>1</sup>. This involves identifying the key processes that contribute to the department's productivity and are comparable across different facilities<sup>1</sup>. Once these processes are identified, they can be measured and compared to similar processes at other facilities<sup>1</sup>. This comparison can provide valuable insights into areas where the department is performing well and where there may be opportunities for improvement<sup>1</sup>.

References:

<https://www.indeed.com/career-advice/career-development/benchmarking-in-health-care>

### NEW QUESTION # 180

When counting unique events, one uses a p-chart. The number plotted on a chart would be either a proportion or a percentage. When counting total events (e.g., the number of falls per patient day each month), one plots a ratio on a u-chart. Examples of attributes data plotted as percentage on p-charts include figures such as:

- A. Percentage of patients discharged
- B. Percentage of visits by every patient
- C. Percentage of scripts that had one or more medication errors
- D. Percentage of patients who died

**Answer: C,D**

### NEW QUESTION # 181

A quality professional is the leader of a team in the storming phase of development. Which of the following should the quality professional be prepared to do?

- A. Be willing to share leadership responsibilities.
- B. Direct and provide role clarification.
- C. Move to a more supportive leadership style.
- D. Redirect conflict to energize the team.

**Answer: B**

Explanation:

The storming phase is the second stage of team development, where conflicts and differences in opinions may arise<sup>12</sup>. During this phase, the team is still figuring out how to work well together<sup>1</sup>. The leader's role is crucial at this stage. They need to provide clear direction for the project and help individuals on the team get to know and accept each other<sup>3</sup>. This involves directing the team and providing role clarification<sup>3</sup>, which aligns with option A.

### NEW QUESTION # 182

To identify outpatient data sources, the team should consider the following questions EXCEPT:

- A. Some of the most important diabetes measures are based on laboratory testing. Do the physicians have their own labs? If so, do they achieve the laboratory data for 12-24 month snapshot? If they do not do their own lab testing, do they use a

common reference lab that would be able to supply the data?

- B. Do the source outpatient data is the same as inpatient data
- C. Are the physician in organized medical groups that have outpatient electronic medical records, which could be a source of data? Will their financial or billing systems be able to identify all patients with diabetes in their practices? If not, can the health plans in the area supply the data by practice site or individual physician?
- D. Do the measures selected by team reflect the aspects of care that have the most influence on patient's outcome

**Answer: B**

#### NEW QUESTION # 183

A healthcare quality professional identifies a need to improve compliance with colon cancer screening among primary care patients. Which of the following interventions should be used?

- A. Develop a clinical pathway for managing high-risk patients.
- B. Improve documentation of patient education on cancer risk factors.
- C. Measure the number of patients who complete an annual screening.
- D. Send reminders to patients six months before required screening.

**Answer: D**

Explanation:

Detailed Explanation:

Sending reminders to patients is an effective intervention to improve compliance with scheduled screenings.

Option B: Send reminders to patients six months before required screening Reminder systems are proven to increase adherence to screening schedules.

References:

Patient reminders are recommended in CPHQ resources as an evidence-based approach to improve preventive screening compliance.

#### NEW QUESTION # 184

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