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NAHQ CPHQ Exam Syllabus Topics:

Topic	Details
Topic 1	<ul style="list-style-type: none">Performance and Process Improvement: This section of the exam measures the skills of process improvement specialists and covers methodologies for enhancing healthcare services. It emphasizes identifying inefficiencies and implementing strategies for continuous improvement.
Topic 2	<ul style="list-style-type: none">Patient Safety: This section of the exam measures the skills of Healthcare Managers and covers essential practices for ensuring patient safety in healthcare environments. It focuses on identifying risks and implementing safety protocols.
Topic 3	<ul style="list-style-type: none">Health Data Analytics: This section of the exam measures the skills of healthcare professionals and covers the use of data to inform quality improvement efforts.
Topic 4	<ul style="list-style-type: none">Quality Leadership and Integration: This section of the exam measures the skills of healthcare quality managers and covers the principles of effective leadership in healthcare settings. It focuses on understanding how to integrate quality initiatives within organizational structures. Key skills include strategic planning and team collaboration, emphasizing fostering a culture of quality.
Topic 5	<ul style="list-style-type: none">Population Health and Care Transitions: This section of the exam measures the skills of healthcare quality managers and covers strategies for managing patient populations effectively.

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NAHQ CPHQ examination is an important certification for healthcare quality professionals. It is designed to test the knowledge and skills required to assess, plan, implement, and evaluate healthcare quality and patient safety practices. CPHQ exam is comprehensive and covers a range of topics related to healthcare quality and patient safety. Candidates who pass the exam are recognized as experts in the field of healthcare quality and patient safety, which can help them advance their careers and make a positive impact on the healthcare industry.

NAHQ CPHQ (Certified Professional in Healthcare Quality) Examination is a certification exam that focuses on assessing the knowledge and skills of healthcare professionals in the field of healthcare quality. CPHQ exam is designed to help healthcare professionals demonstrate their expertise in the field and enhance their career prospects.

NAHQ Certified Professional in Healthcare Quality Examination Sample Questions (Q92-Q97):

NEW QUESTION # 92

Credentialing refers to the process of _____ a well-qualified staff that is able to deliver highest-quality care.

- **A. Hiring**
- B. Awarding
- C. Compensating
- D. Nominating

Answer: A

NEW QUESTION # 93

A Pharmacy and Therapeutics Committee has reviewed the following control chart for presentation to a governing body:

□ Which of the following conclusions is most appropriate?

- **A. There has been a significant reduction in reported errors.**
- B. The most serious errors are occurring in the spring and summer.
- C. The strategic goal for improving reporting of errors has been met.
- D. The strategic goal for improving patient safety has been met.

Answer: A

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

In the Health Data Analytics domain, control charts are used to assess process stability and variation over time.

The chart shows that the medication error rate initially fluctuated, reaching a peak above the mean, and then displayed a sharp and sustained decline below the lower control limit (LCL) during the last several months.

A drop beyond the LCL indicates a special cause variation, suggesting a significant change in the system - in this case, a substantial reduction in reported medication errors.

However, because the data only reflect the number of reported errors, not the actual rate of occurrence, it is more accurate to conclude there has been a reduction in reported errors - not necessarily that patient safety goals have been met.

References:

NAHQ CPHQ Content Outline - Health Data Analytics: Control Chart Interpretation and Variation Analysis NAHQ Healthcare

Quality Competency Framework - Measurement and Analytics: Detecting and Interpreting Special Cause Variation Key

takeaway: A sustained change below the lower control limit reflects special cause variation and indicates a significant process shift - in this context, a reduction in reported medication errors.

NEW QUESTION # 94

According to Joint Commission standards, the safety program must include all of the following EXCEPT:

- **A. Monthly safety committee meetings**
- B. Orientation and continuing education on safety issues
- C. Planned response to natural disasters

- D. Review of safety policies and procedures for all departments

Answer: A

NEW QUESTION # 95

Within the strategic management process, which of the following actions is most relevant in determining what projects are feasible for an organization?

- A. Identifying strategic opportunities and threats
- B. Performing a stakeholder analysis
- C. Reviewing resources, capabilities, and core competencies
- D. Completing a community health needs assessment

Answer: C

Explanation:

Detailed Explanation:

Reviewing resources, capabilities, and core competencies is essential for assessing project feasibility by determining if the organization has the necessary resources and skills.

Option C: Reviewing resources, capabilities, and core competencies

This action assesses the internal factors that impact an organization's ability to undertake projects.

References:

CPHQ resources and strategic management literature emphasize reviewing resources and competencies to ensure project feasibility.

NEW QUESTION # 96

A new urgent care clinic is setting up a quality management system. Which of the following is the best choice as a process measure to evaluate effective clinical care?

- A. percent of antibiotic prescriptions that meet evidence-based guidelines
- B. average wait time between check-in and seeing a provider
- C. percent of patients that rate care as "satisfactory" or "highly satisfactory"
- D. raw number of influenza vaccines given in the annual flu season

Answer: A

Explanation:

The best process measure to evaluate effective clinical care in a new urgent care clinic is the percentage of antibiotic prescriptions that meet evidence-based guidelines. This measure directly reflects the quality of clinical decision-making and adherence to best practices, which are crucial for providing effective and safe patient care. It helps ensure that antibiotics are prescribed appropriately, reducing the risk of resistance and other complications.

* Percent of patients rating care as "satisfactory" or "highly satisfactory" (A): This is a patient satisfaction measure, which is important but not a direct measure of clinical care effectiveness.

* Raw number of influenza vaccines given (B): This is a volume measure, which does not directly reflect the quality of clinical care.

* Average wait time between check-in and seeing a provider (D): This is a measure of efficiency, not necessarily of clinical care effectiveness.

References

* NAHQ Body of Knowledge: Process and Outcome Measures in Quality Management

* NAHQ CPHQ Exam Preparation Materials: Evaluating Clinical Care Quality

NEW QUESTION # 97

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