

CPHQトレーニング学習 & CPHQ日本語版と英語版

Practice Test CPHQ

Supports activities that improve outcomes and reduce variation (this will effect multiple domains within quality, including safety, effectiveness, and efficiencies)

Healthcare leaders are confronted with the challenge of increasing quality while reducing costs. Which of the following approaches best advances improvement efforts?

Norming

Team cohesion is established during which of the following staging of team growth?

Conforming

Which of the following IS NOT A PROCESS in the tuckman's stages of group development?

Norming

Forming

Performing

Conforming

Empowerment and training

Which of the following should a quality council provide to best ensure success of performance improvement teams?

Planning carefully, communicating openly, and leading effectively

A healthcare entity initiating re-structuring must consider the impact on staff to ensure the greatest opportunity for success by:

Mean (The mean is the statistical average of the set. It is often used to describe average length of stay for comparison and is used with the standard deviation to understand the variability around the mean)

The utilization management committee is reviewing length of stay data for a particular procedure. In comparing data by physician, which of the following statistics will be most useful?

Define the future direction for quality

The primary purpose of an organization's quality improvement strategic plan is to:

Identify and resolve discrepancies

Medication reconciliation is a process intended to:

Conduct a focused analysis of pressure ulcer cases

The following table shows the percentage of hospital acquired pressure ulcers; which of the following should the healthcare quality professional do next?

Studying the process to understand the error

When errors are discovered, staff and supervisors best demonstrate a culture of safety by:

Evaluate compliance with the pathway (Evaluation of compliance with the proven pathways should be conducted first to see if that may be influencing the lack of change in the outcome)

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>> CPHQトレーニング学習 <<

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NAHQ Certified Professional in Healthcare Quality Examination 認定 CPHQ 試験問題 (Q326-Q331):

質問 # 326

Which of the following is an effective method to motivate employees to participate in performance improvement?

- A. Provide mandatory training on an annual basis.
- B. Display a success storyboard in the employee break room.
- C. Highlight successes real time in huddles.
- D. Host regular town hall meetings.

正解: C

解説:

Highlighting successes in real-time during huddles is an effective method to motivate employees to participate in performance improvement^{1,2}. This approach allows for immediate recognition of employees' efforts and achievements, which can boost morale and motivation¹. It also provides an opportunity for employees to learn from each other's successes and to understand what actions and behaviors lead to positive outcomes². This can encourage employees to replicate these actions and behaviors in their own work, thereby improving their performance².

References:

<https://www.indeed.com/career-advice/career-development/improve-employee-performance>

質問 # 327

The preferred culture in promoting patient safety

- A. fosters collaboration and uses anonymous reporting.
- B. audits standards and promotes learning from mistakes.
- C. promotes learning from mistakes and fosters collaboration.
- D. uses anonymous reporting and audits standards.

正解: C

解説:

The preferred culture in promoting patient safety is one that promotes learning from mistakes and fosters collaboration. This is because a culture that promotes learning from mistakes encourages a non-punitive environment where individuals feel safe to report errors and near misses. This openness allows for the identification of systemic issues that can be addressed to prevent future errors¹. On the other hand, fostering collaboration is crucial in patient safety as it encourages open communication and teamwork among healthcare professionals. Collaboration ensures that all team members can contribute their expertise to patient care, which can lead to improved patient outcomes^{2,3}.

References:

Clinical nurse competence and its effect on patient safety culture: a systematic review¹ Patient safety culture: a systematic review by characteristics of Hospital Survey on Patient Safety Culture dimensions² Key drivers of promoting patient safety culture from the perspective of³

質問 # 328

What is the initial step an organization should take when the strategic goal of improving patient satisfaction has not been met?

- A. Perform a needs assessment
- B. Implement benchmarking
- C. Conduct a root cause analysis
- D. Review department-specific data

正解: C

解説:

Failing to meet a strategic goal like improving patient satisfaction requires identifying the underlying reasons for the shortfall to inform effective interventions.

Option A (Implement benchmarking): Benchmarking compares performance to peers, useful later but not the initial step to understand internal issues.

Option B (Review department-specific data): Data review is part of root cause analysis but is too narrow as an initial step, as it assumes departmental issues.

Option C (Perform a needs assessment): Needs assessments identify gaps in resources or training, but they follow understanding the cause of failure.

Option D (Conduct a root cause analysis): This is the correct answer. The NAHQ CPHQ study guide states, "When a strategic goal like patient satisfaction is not met, the initial step is to conduct a root cause analysis to identify underlying causes, such as process or communication failures" (Domain 4). RCA uses tools like fishbone diagrams to pinpoint issues.

CPHQ Objective Reference: Domain 4: Performance and Process Improvement, Objective 4.5, "Identify causes of performance gaps," emphasizes RCA for unmet goals. The NAHQ study guide notes, "RCA is critical to understand why strategic objectives are not achieved" (Domain 4).

Rationale: RCA identifies the root causes of the satisfaction gap, aligning with CPHQ's improvement principles.

Reference: NAHQ CPHQ Study Guide, Domain 4: Performance and Process Improvement, Objective 4.5.

質問 # 329

A healthcare quality professional receives complaints from numerous patients that the registration process is inefficient. Which of the following should be used to best identify customer expectations, perceptions, and improvement opportunities?

- A. interviews with registration staff
- B. telephone survey of patients
- C. written survey of registration staff
- **D. focus group with patients**

正解: D

解説:

To address complaints about the inefficiency of the registration process, it is crucial to accurately identify patient expectations, perceptions, and potential areas for improvement. Here's a step-by-step rationale for why a focus group with patients is the best option:

* Understanding Customer Expectations and Perceptions:

* Focus groups allow for in-depth discussions where patients can express their experiences, expectations, and perceptions in a more detailed and nuanced manner than surveys.

* This method encourages dialogue, enabling the facilitator to probe deeper into issues that patients might not think to mention in a survey.

* Interactive Feedback and Clarification:

* Unlike surveys, which are typically more rigid and can limit the depth of feedback, focus groups provide a platform where participants can clarify their thoughts, build on others' comments, and discuss their ideas interactively.

* This interaction helps to uncover insights into patient frustrations, misunderstandings, and areas that might need improvement in the registration process.

* Opportunity Identification:

* Focus groups are excellent for identifying actionable improvement opportunities as they reveal not only what the issues are but also why they are problematic from the patients' perspectives.

* Through facilitated discussions, common themes and specific suggestions for improvements can emerge, which might not be captured in more quantitative approaches like surveys.

* Comparison with Other Methods:

* Telephone Surveys: While they can reach a broad audience, they may not capture the depth of feedback necessary to truly understand patient expectations and perceptions.

* Written Surveys: These can collect a large amount of data, but often lack the richness of qualitative data needed to identify nuanced patient experiences and improvement opportunities.

* Interviews with Registration Staff: While important for understanding internal perspectives, they do not directly capture the patient's voice, which is essential for customer-centered improvements.

In summary, the focus group method is best suited to gain deep insights into customer expectations, perceptions, and to identify specific areas for improvement in the registration process due to its interactive and exploratory nature.

References:

NAHQ Healthcare Quality Competency Framework: Customer Expectations and Patient Engagement NAHQ Guide to Performance and Process Improvement in Healthcare

質問 # 330

Quality and technical performance refers to how well current scientific medical knowledge and technology are applied in a given situation.

It is usually assessed in terms of:

- A. Timeliness and accuracy of the diagnosis
- B. Appropriateness of therapy and other medical interventions are performed
- C. The quality of interpersonal relationships
- **D. Both A & B**

正解: D

質問 # 331

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- CPHQ最新対策問題 □ CPHQ資格認定試験 □ CPHQ受験内容 □ URL ➡ www.goshiken.com □ □ □ をコピーして開き、【CPHQ】を検索して無料でダウンロードしてください CPHQ無料問題
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