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## NAHQ Certified Professional in Healthcare Quality Examination Sample Questions (Q389-Q394):

### NEW QUESTION # 389

Two key data collection skills satisfaction and sampling enhance any data collection effort. These skills are based more on \_\_\_\_\_ and \_\_\_\_\_ than on statistics, yet many healthcare professionals have received limited training in both concepts.

- A. Logic and reliability
- B. Logic and clear thinking
- C. Ethics and reliability
- D. Relatedness and latest happenings

**Answer: A**

### NEW QUESTION # 390

A local health center is launching a community health assessment. What data is recommended to identify the potential needs of the

population?

- A. highest level of education of healthcare professionals
- B. number of fast food restaurants in the area
- **C. top five diagnoses for patient visits**
- D. zip codes for patients frequently using the emergency department

**Answer: C**

Explanation:

When launching a community health assessment, identifying the top five diagnoses for patient visits is recommended to understand the prevalent health issues within the population. This data helps pinpoint the most common health concerns and prioritize areas for intervention and resource allocation. It provides a clear picture of the community's health needs, which is essential for planning effective public health strategies.

Zip codes for patients frequently using the emergency department (A): This can identify geographic areas of need but does not provide direct information on the types of health issues prevalent in the community.

Highest level of education of healthcare professionals (B): This is related to workforce capabilities rather than community health needs.

Number of fast food restaurants in the area (D): While relevant to understanding certain social determinants of health, it does not directly identify specific health needs.

References

NAHQ Body of Knowledge: Community Health Assessment and Needs Identification NAHQ CPHQ Exam Preparation Materials: Data Collection for Community Health Improvement

#### **NEW QUESTION # 391**

Which of the following most accurately describes medication reconciliation?

- A. sharing responsibility between pharmacy and nursing
- B. creating a list of a patient's prescription medications
- C. monitoring patient adherence to medication regimens
- **D. identifying and resolving medication discrepancies**

**Answer: D**

Explanation:

Medication reconciliation is the process of identifying and resolving medication discrepancies to ensure that patients receive the correct medications. This process involves comparing the patient's current medications with new prescriptions, ensuring that there are no omissions, duplications, or interactions that could lead to adverse effects.

Steps in Medication Reconciliation: The process typically involves:

Collecting an accurate list of the patient's current medications (including prescription, over-the-counter, and herbal supplements).

Comparing this list with new medication orders or prescriptions.

Identifying discrepancies, such as omitted medications, incorrect dosages, or potentially harmful drug interactions.

Resolving these discrepancies by consulting with the prescribing physician, pharmacist, or other healthcare providers.

Comparison to Other Options:

B: creating a list of a patient's prescription medications: While creating a medication list is a part of the reconciliation process, the primary goal is to resolve discrepancies, not just to list medications.

C: monitoring patient adherence to medication regimens: Monitoring adherence is important, but it is not the primary focus of medication reconciliation.

D: sharing responsibility between pharmacy and nursing: While collaboration between pharmacy and nursing is essential, medication reconciliation is specifically about identifying and addressing discrepancies.

Reference: NAHQ guidelines on medication safety stress the importance of medication reconciliation as a critical process for preventing errors and ensuring patient safety, focusing on the identification and resolution of discrepancies as the core objective.

#### **NEW QUESTION # 392**

A physician group with a patient population of 10,000 during the fourth quarter of a year reviewed 100 complaints regarding access to specialty care. During the fourth quarter of the next year, the patient population had grown to 60,000 with 360 complaints regarding access to specialty care. The group has a target goal of five complaints per 1,000 patients. Which of the following should a healthcare quality professional conclude based on the data?

- A. The rate of complaints has decreased, but the target has not been reached.
- B. The rate of complaints has increased, but remains within the target range.
- C. The rate of complaints has increased and has exceeded the target.
- D. The rate of complaints has decreased, and the target has been reached.

**Answer: A**

Explanation:

Detailed Explanation:

The complaint rate in the current year is 6 complaints per 1,000 patients (360 complaints/60,000 patients), which is an improvement from the previous rate of 10 complaints per 1,000 but still does not meet the target of 5 per 1,000.

References:

Calculating and interpreting complaint rates per 1,000 patients helps assess quality performance, as outlined in CPHQ study materials.

### NEW QUESTION # 393

Because of the goals of care can be defined broadly, outcome measures have come to include the costs of care as well as patients' satisfaction with care.

In formulations that stress the technical aspects of care, however outcome typically refers to:

- A. Appropriate and potentially harmless care
- B. Special set of clinical activities
- C. Desired results
- D. Health status-related indicators such as whether the pain subsided

**Answer: D**

### NEW QUESTION # 394

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