

CPHQ Instant Access, CPHQ Exam Actual Tests



DOWNLOAD the newest Exams4Collection CPHQ PDF dumps from Cloud Storage for free: <https://drive.google.com/open?id=1STgQ8iRtyEizwxM5AS1zaCcPC4P8zWwo>

You can find that there are three versions of the CPHQ training questions: the PDF, Software and APP online. As you if you have more time at home, you can use the Software version of CPHQ exam materials. If you are a person who likes to take notes, you can choose the PDF version. You can print out the PDF version of CPHQ Practice Engine, carry it with you and read it at any time. If you are used to reading on a mobile phone, you can use our APP version.

The software version of the CPHQ study materials is very practical. This version has helped a lot of customers pass their exam successfully in a short time. The most important function of the software version is to help all customers simulate the real examination environment. If you choose the software version of the CPHQ Study Materials from our company as your study tool, you can have the right to feel the real examination environment. In addition, the software version is not limited to the number of the computer.

>> CPHQ Instant Access <<

CPHQ Exam Actual Tests & CPHQ Valid Exam Camp

If you fail CPHQ exam unluckily, don't worry about it, because we provide full refund for everyone who failed the exam. You can ask for a full refund once you show us your unqualified transcript to our staff. The whole process is time-saving and brief, which would help you pass the next CPHQ Exam successfully. Please contact us through email when you need us. Our purchasing process is designed by the most professional experts, that's the reason why we can secure your privacy while purchasing our CPHQ test guide.

The CPHQ certification is a valuable credential for healthcare quality professionals. Certified Professional in Healthcare Quality Examination certification demonstrates the candidate's proficiency in healthcare quality management and their commitment to improving the quality of patient care. The CPHQ credential is recognized by healthcare organizations worldwide, making it an essential qualification for healthcare quality professionals seeking to advance their careers.

NAHQ Certified Professional in Healthcare Quality Examination Sample Questions (Q291-Q296):

NEW QUESTION # 291

An organization recently completed an analysis of safety events from the last year. The majority of events were related to the following:

- * provider order transcription errors (5%)
- * wrong medication given to the patient (12%)
- * adverse reaction related to medication allergies (7%)
- * Inappropriate medication dose administered (10%)
- * delayed antibiotic administration (10%)

Which of the following would be most helpful to enhance patient safety in this organization?

- A. automated dispensing machine
- B. computerized provider order entry

- C. bar code medication administration
- D. verbal order read-back

Answer: B

Explanation:

The question is about enhancing patient safety in an organization that has experienced a variety of safety events, most notably related to medication errors such as wrong medication given to the patient, inappropriate medication dose administered, and delayed antibiotic administration.

Computerized Provider Order Entry (CPOE) systems can significantly reduce transcription errors¹. These systems allow direct entry of medical orders by the person with the licensure to do so, which are then transmitted directly to the relevant department. This eliminates the need for handwritten or verbal orders that can be misinterpreted or lost¹.

CPOE systems can also incorporate decision support systems that provide alerts for potential medication errors, such as drug-drug interactions, allergies, or incorrect dosages¹. This can help prevent wrong medication being given to the patient or inappropriate medication doses being administered.

While all the options provided can contribute to patient safety, the CPOE system addresses multiple issues identified in the safety events analysis, making it the most comprehensive solution among the options provided¹. Therefore, implementing a CPOE system would be the most helpful to enhance patient safety in this organization¹.

NEW QUESTION # 292

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

Answer: B

NEW QUESTION # 293

Patient complaints have been received regarding appointment time delays. Which of the following should be completed first?

- A. Initiate a new patient registration process
- B. Perform a patient survey
- **C. Obtain waiting time data**
- D. Form a performance improvement team

Answer: C

Explanation:

Addressing patient complaints about appointment delays requires a data-driven approach to understand the scope and causes of the issue before taking action.

Option A (Form a performance improvement team): A team is formed after data confirms the issue and identifies focus areas.

Option B (Perform a patient survey): Surveys gather perceptions, but objective data (e.g., actual wait times) is needed first to validate complaints.

Option C (Obtain waiting time data): This is the correct answer. The NAHQ CPHQ study guide states, "The first step in addressing complaints about delays is to obtain objective data, such as waiting time metrics, to confirm and quantify the issue" (Domain 4). This informs subsequent actions.

Option D (Initiate a new patient registration process): Changing processes is premature without data to identify specific causes of delays.

CPHQ Objective Reference: Domain 4: Performance and Process Improvement, Objective 4.5, "Use data to identify improvement opportunities," emphasizes collecting data first. The NAHQ study guide notes,

"Objective data collection is the initial step in validating complaints" (Domain 4).

Rationale: Obtaining waiting time data validates and quantifies the issue, aligning with CPHQ's data-driven improvement principles.

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

NEW QUESTION # 294

A Rapid Process Improvement Team began a new process on January 7 to reduce targeted events per bed day outcome. The team asked the quality analyst to help determine whether the new process was successful and should be continued. Based on the control chart the quality analyst produced, which of the following is the best conclusion?

- A. There was a decreasing shift in the process, recommend continuing the process.
- B. There was an increasing shift in the process, recommend discontinuing the process.
- C. There was a decreasing trend in the process, recommend discontinuing the process.
- D. There was a spike in the process, recommend discontinuing the process.

Answer: A

Explanation:

* Reviewing the Control Chart Data The control chart shows "Events/Bed Day" over time, with the Upper Control Limit (UCL), Lower Control Limit (LCL), and a center line (CL) marking the baseline average of the process before the intervention.

* Identifying the Impact of the New Process

* The intervention to reduce events per bed day was implemented on January 7.

* Following this date, there is a noticeable and consistent decrease in the number of events per bed day, with data points gradually moving downward.

* Eventually, the values settle well below the original center line, indicating a decreasing shift in the process.

* Differentiating Between Trends and Shifts

* A shift is characterized by a sustained change in process level, often due to a successful intervention, as seen here with lower event rates maintained over time.

* In this case, the shift is in a favorable direction, as the targeted events per bed day have reduced significantly and consistently.

* A trend would indicate a continuous movement in a direction, but this chart shows that after an initial decline, the process stabilizes at a lower rate.

* Conclusion Since the process has demonstrated a decreasing shift, indicating improvement and reduced events per bed day, the correct recommendation is to continue the process, as it appears successful in achieving the goal.

References:

NAHQ "Statistical Process Control and Process Improvement Strategies"

"Evaluating Shifts and Trends in Control Charts for Quality Improvement" (NAHQ, 2021)

NEW QUESTION # 295

A quality improvement team has been trained on writing SMART aim statements. Below are the team's aim statements:

* Reduce adverse drug events in critical care by 10% within 12 months.

* Reduce the time from 911 call to intervention for cardiac complaints by 15%.

* Reduce 30-day readmissions from 20% to 15%. Which of the following key elements in aim development appears to have been lost after the training?

- A. time-bound
- B. measurable
- C. achievable
- D. specific

Answer: A

Explanation:

The key element in aim development that appears to have been lost after the training is "time-bound." The first aim statement includes a specific timeframe ("within 12 months"), but the second and third aim statements lack a clear deadline for achieving their goals. A SMART aim statement should include a specific time frame to create urgency and allow for timely assessment of progress.

* Achievable (B): The goals seem realistic, so achievability is not the issue.

* Measurable (C): The goals are quantifiable, indicating they are measurable.

* Specific (D): The aims are clearly defined, making them specific.

References

* NAHQ Body of Knowledge: SMART Goals and Aim Statements

* NAHQ CPHQ Exam Preparation Materials: Developing Effective Aim Statements

NEW QUESTION # 296

