

NAHQ CPHQ Latest Exam Vce & CPHQ Valid Dumps

NAHQ CPHQ Practice Test 2022 Questions With Answers

True * Question - The governing body is responsible for setting policy, financial and strategic direction, quality of care, and setting goals and objectives
A. True
B. False

False * Question - The governing body is responsible for implementing strategies and collecting measurements of quality indicators.
A. True
B. False

d. 80% * Question - According to TJC (2012), how many serious medical errors involved miscommunication between caregivers when patients are transferred or handed-off?
a. 67%
b. 25%
c. 32%
d. 80%

True * Question - Observation and documentation of interpersonal and communication skills is an example of an FPPE.
A. True
B. False

True * Question - An example of criteria that might be tracked for OPPE is morbidity and mortality data
A. True
B. False

True * Question - Examples of data for physician profiles include data representing major service lines, patient safety issues, and outpatient information
A. True
B. False

b. Be a visible participant in the process * Question - A CQO has the responsibility for education and implementation of a quality improvement process. To affect cultural change, the CQO must:
a. Receive quarterly reports
b. Be a visible participant in the process
c. Believe the costs are justified by the benefits

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NAHQ CPHQ exam is a computer-based exam that is administered at Pearson VUE testing centers. CPHQ exam consists of 115 multiple-choice questions, and candidates have three hours to complete the exam. Upon passing the exam, candidates will receive the CPHQ certification and will be recognized as a healthcare quality professional.

Revision Books

- **HQ Solutions: Resource for the Healthcare Quality Professional (Fourth Edition)**

If you're in need for another preparatory material, grab a copy of this book. Offering a comprehensive guideline in working with healthcare structures, the material is no doubt a relevant tool in polishing your skillset. Its content is categorized into four sections, which is parallel with the exam outline as listed earlier.

The book provides in-depth guidance on the appropriate way to create quality structures that aid both provider and patient. It also highlights some cost-effective solutions as well as safe and efficient care methods. And course, the material itself is written by industry experts, hence the quality of the contents. So, if you want to master the fundamentals of top-notch healthcare, along with its important data management tools, incorporate this into your list of must-have references. Truly, this is a great companion for both training courses.

- **Essentials of Managed Health Care by Peter R. Kongstvedt**

Carry on with your training and make use of this top-ranking book from Peter R. Kongstvedt. The material supplies you with an authoritative outline of the attributes related to healthcare. Its main focus is on the commercial sector, particularly Medicare and Medicaid. It also takes into account relevant features of health insurance needed in the military field.

On top of that, there will be a historical overview of the managed care plans, along with their functional differences. This historical elaboration makes it easy to further understand the framework of healthcare. In addition, it addresses the influence of the Patient Protection and Affordable Care Act (HR 3590) and the Genetic Information Non-disclosure Act (GINA) on the industry as well.

- **The Healthcare Quality Handbook by Janet A. Brown**

Supplement your knowledge with third-party resources that are also suggested by NAHQ. First on the list is the 2018 edition of Janet Brown's Healthcare Quality Handbook that features the latest content outline of the test. Comparatively, this book is revised annually to provide quality and up-to-date lessons for those who are prepping for their CPHQ Certification Exam.

Because of this, it presents invaluable groundwork of the key healthcare aspects and protocols. It also serves as an optimal tool for anyone aspiring to be more adept with operational roles in healthcare leadership. Furthermore, the content of the book ensures that you can demonstrate competence in your chosen field to improve the healthcare level and credibility of your profession.

NAHQ Certified Professional in Healthcare Quality Examination Sample Questions (Q633-Q638):

NEW QUESTION # 633

Which of the following is the best example of population health management?

- A. reducing turn-around times in the emergency department
- **B. ensuring timely access to eye examinations for people with diabetes**
- C. reducing medication errors in a pharmacy
- D. ensuring accurate medication reconciliation for people in hospice care

Answer: B

Explanation:

Population health management focuses on improving the health outcomes of a specific group by managing and coordinating care across the health continuum. Ensuring timely access to eye examinations for people with diabetes is a prime example of population health management because it targets a specific group (people with diabetes) and addresses a preventive measure (eye exams) to reduce the risk of complications, such as diabetic retinopathy.

Reducing medication errors in a pharmacy (B): While important, this is more related to patient safety and quality improvement in a specific setting rather than population health management.

Reducing turn-around times in the emergency department (C): This improves efficiency but is not directly related to managing the health of a specific population.

Ensuring accurate medication reconciliation for people in hospice care (D): This is critical for patient care but focuses on a specific care process rather than broad population health management.

Reference

NAHQ Body of Knowledge: Population Health Management and Preventive Care NAHQ CPHQ Exam Preparation Materials: Examples of Population Health Strategies

NEW QUESTION # 634

Once you have resolved these issues, the data collection should go smoothly. Unfortunately, many quality improvement teams do not spend sufficient time discussing their data collection plans. They want to move immediately to data collection step. This haste usually guarantees that the team will:

- A. Collect the wrong data
- B. Reschedule the time and cost
- C. Become frustrated with the entire measurement journey
- D. Collect too much (or too little) data

Answer: A,C,D

NEW QUESTION # 635

A nursing director for a unit in a cancer hospital is reviewing and assessing outcomes data in the following scatter diagram:

The relationship between the incidence of infection and the decrease in staffing targets is

- A. strong and negative.
- B. strong and positive.
- C. weak and positive.
- D. weak and negative.

Answer: A

Explanation:

The scatter diagram shows that as the decrease in staffing targets becomes more significant (moving right on the horizontal axis), the incidence of infection goes up (moving up on the vertical axis). This indicates a negative relationship because as one variable increases, the other one decreases. The relationship appears to be strong because the points lie closely to an imaginary line that slopes upwards from left to right, which suggests a consistent trend across the data points.

References: In healthcare quality improvement, it is critical to use data to inform decision-making. Scatter diagrams are a common tool used for this purpose. The NAHQ Healthcare Quality Competency Framework emphasizes the importance of analyzing and utilizing data in decision-making, as indicated in the Performance and Process Improvement domain. A strong negative relationship in this context could indicate that decreased staffing levels are associated with higher infection rates, which is a significant finding for a nursing director assessing outcomes and considering quality improvement initiatives.

NEW QUESTION # 636

Where in the process of ensuring correct surgery does a "time-out" take place?

- A. just before leaving the unit
- B. immediately before surgery
- C. just before entering the operating room
- D. immediately upon arrival in the recovery room

Answer: B

Explanation:

A "time-out" takes place immediately before surgery. This pause is a critical safety step designed to ensure that the surgical team is about to perform the correct procedure on the correct patient and at the correct site.

During the time-out, the surgical team reviews and confirms key details such as patient identity, surgical site, and procedure, thereby preventing errors and enhancing patient safety.

* Just before leaving the unit (A): This step may involve confirming patient information, but the formal time-out occurs just before surgery.

* Just before entering the operating room (C): Final checks may be conducted, but the time-out is conducted after the patient is in the operating room and before the procedure begins.

* Immediately upon arrival in the recovery room (D): This is after the surgery is completed, so it is not the appropriate time for a time-out.

References

* NAHQ Body of Knowledge: Surgical Safety and Time-Out Procedures

* NAHQ CPHQ Exam Preparation Materials: Ensuring Correct Surgery Protocols

NEW QUESTION # 637

A multidisciplinary team has been convened to review delays in laboratory turnaround time between the medicine clinic and the laboratory. The team's first step in evaluating the issue is to

- A. conduct a failure mode and effects analysis.
- B. observe how the medical assistants prepare the specimens.
- C. see if the surgery clinic is also experiencing delays.
- D. create a flow chart to study the process.

Answer: D

NEW QUESTION # 638

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