Get Pass4Leader NAHQ CPHQ Real Questions Today with Free Updates for 365 Days

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

What's more, part of that Pass4Leader CPHQ dumps now are free: https://drive.google.com/open?id=1-TD9oLyUdcLjI9kynDQWT4L2knh6S9rE

As is known to us, our company is professional brand established for compiling the CPHQ exam materials for all candidates. The CPHQ guide files from our company are designed by a lot of experts and professors of our company in the field. We can promise that the CPHQ certification braindumps of our company have the absolute authority in the study materials market. We believe that the study materials designed by our company will be the most suitable choice for you. You can totally depend on the CPHQ Guide files of our company when you are preparing for the exam.

Pass4Leader is fully aware of the fact that preparing successfully for the NAHQ CPHQ exam in one go is a necessity because of the expensive registration fee. For applicants like you, success in the Certified Professional in Healthcare Quality Examination exam on the first attempt is crucial to saving money and time. Our Free NAHQ CPHQ Exam Questions will help you decide fast to buy the premium ones.

>> CPHQ Valid Exam Testking <<

Exam CPHQ Guide & Reliable CPHQ Test Forum

In order to meet different needs for CPHQ exam bootcamp, three versions are available. You can choose the most suitable one

according to your own exam needs. All three have free demo for you to have a try before buying. CPHQ PDF version is printable, you can study them anytime. CPHQ Soft test engine supports MS operating system, and have two modes for practice, and it can also stimulate the real exam environment, therefore, this version can build you exam confidence. CPHQ Online test engine is convenient to learn, and it also supports offline practice.

The CPHQ exam covers a wide range of topics related to healthcare quality management, including healthcare regulations and standards, quality improvement methodologies, data analysis and management, and patient safety. CPHQ Exam is designed to assess the candidate's knowledge and skills in these areas, and passing the exam requires a comprehensive understanding of the key concepts and principles in healthcare quality management.

NAHQ Certified Professional in Healthcare Quality Examination Sample Questions (Q351-Q356):

NEW QUESTION # 351
The culture of safety survey data below is collected from perioperative services. Which action should the healthcare quality professional recommend?

- A. Implement a leadership training series on Just Culture principles.
- B. Educate perioperative staff on how to submit incident reports.
- C. Establish a process for executive walk-arounds in the perioperative departments.
- D. Develop a team-based communication training for perioperative staff.

Answer: C

Explanation:
The culture of safety survey data provides insights into the perceptions of perioperative staff regarding patient safety practices, scored on a scale (typically 1 to 5, where 5 is the highest). The scores are as follows: hospital management's prioritization of safety (4), reporting mistakes without fear (4.83), discussing error prevention (4.67), and interdepartmental information exchange (4.24). The lowest score is 4 for the item "The actions of hospital management show that patient safety is a top priority," indicating a relative weakness in visible leadership commitment to safety, which is a critical component of a strong safety culture.
According to NAHQ CPHQ study materials, a key principle of a culture of safety is the visible commitment of leadership to patient safety, as it sets the tone for the organization and influences staff behavior. The score of 4 suggests that while staff perceive some prioritization, there is room for improvement in how management demonstrates this commitment. Establishing a process for executive walk-arounds in the perioperative departments (B) directly addresses this gap by increasing leadership visibility, fostering open communication, and demonstrating that patient safety is a priority. Walk-arounds allow leaders to engage with staff, observe processes, and address safety concerns in real-time, which can improve perceptions of leadership commitment.
Implementing a leadership training series on Just Culture principles (A) is relevant for the high score of 4.83 in reporting without fear, but this area is already strong, and the survey does not indicate a punitive culture needing immediate focus. Developing team-based communication training (C) could address the score of 4.24 for interdepartmental information exchange, but this is not the lowest-scoring item, and communication issues are secondary to leadership visibility in this context. Educating staff on incident reporting (D) is unnecessary given the high score of 4.83 for reporting without fear, indicating staff are already comfortable with reporting.
NAHQ emphasizes addressing the weakest areas of a safety culture first, making leadership visibility the priority here, thus option B is the recommended action.
Reference: NAHQ CPHQ Study Guide, Patient Safety Section, "Culture of Safety and Leadership Engagement"; NAHQ CPHQ Practice Exam, Safety Culture Assessment and Interventions.

NEW QUESTION # 352
Based on this matrix, which of the following ideas should the team address first?

- A. 2 and 5
- B. 3 and 4
- C. 1 and 7
- D. 6 and 8

Answer: A

Explanation:
Based on the matrix provided, ideas 2 and 5 should be addressed first because they are in the quadrant that represents both high impact and high feasibility. Prioritizing ideas that are both highly feasible and likely to have a significant impact ensures that the organization can quickly and effectively implement changes that will yield the most benefit.

High Impact and High Feasibility: Ideas in this quadrant are typically the most promising because they are not only achievable (high feasibility) but also expected to produce meaningful improvements (high impact).

Strategic Prioritization: Addressing these ideas first allows the team to generate quick wins, which can build momentum and support for further quality improvement efforts.

Comparison to Other Options:

A: 1 and 7: High impact but low feasibility-these ideas might be more challenging to implement and could require more resources or time.

B: 3 and 4: Low impact and low feasibility-these ideas are neither easy to implement nor likely to have a significant effect, making them lower priorities.

D: 6 and 8: High feasibility but low impact-while these ideas are easier to implement, their impact might be minimal, so they should not be the primary focus initially.

Reference: NAHQ materials on prioritization in quality improvement emphasize the importance of focusing on initiatives that combine high impact with high feasibility to optimize resource use and maximize outcomes.

NEW QUESTION # 353

A patient sustained a skull fracture as a result of an attack by another patient. A risk manager initiates a root cause analysis. Which of the following is the intended outcome of the investigation?

- A. Determine staff disciplinary actions.
- B. Interview staff.
- C. Develop action items to prevent reoccurrence.
- D. Ban the patient from the facility.

Answer: C

Explanation:

Root Cause Analysis (RCA) is a method used to identify the underlying causes of adverse events in healthcare settings. The primary goal of RCA is not to assign blame but to understand the fundamental issues that led to the event and to develop strategies to prevent future occurrences.

In the scenario provided, the risk manager's initiation of an RCA aims to:

* Analyze the sequence of events leading to the incident.
* Identify system failures or process deficiencies.
* Engage stakeholders in understanding contributing factors.
* Develop and implement corrective actions to mitigate the risk of similar incidents in the future.

While interviewing staff may be part of the RCA process, and disciplinary actions or patient bans might be considered separately, the core objective of RCA is to enhance system safety through preventive measures.

NEW QUESTION # 354

Some database projects rely on medical record review because many of the data are not available in administrative database, e.g.

- A. Nursing record
- B. Measurement that require time stamp, such as administration of antibiotics within one hour before surgical incision
- C. Patient's of test and lab reports
- D. Patient's entries and visits to the physician

Answer: B

NEW QUESTION # 355

An organization has established an ambulatory diabetic management program. Which of the following will best define a successful outcome of the program?

- A. decreased hospital admission rates
- B. increased patient satisfaction
- C. increased compliance with follow-up visits
- D. decreased frequency of missed appointments

Answer: A

Explanation:
Explanation: Decreased hospital admission rates (D) best define success for a diabetic management program, reflecting effective disease control. Missed appointments (A), satisfaction (B), and follow-up compliance (C) are secondary. NAHQ prioritizes clinical outcomes.
NAHQ CPHQ Study Guide, Population Health and Care Transitions Section, "Outcome Measures for Chronic Disease Management"; NAHQ CPHQ Practice Exam, Diabetes Program Evaluation.

NEW QUESTION # 356
......

The third and last format is the Certified Professional in Healthcare Quality Examination (CPHQ) desktop practice test software that can be used on Windows laptops and PCs. Students with laptops or computers can access the software and prepare for it efficiently. The Certified Professional in Healthcare Quality Examination (CPHQ) dumps of Pass4Leader have many premium features, one of which is practice exams (desktop and web-based).

Exam CPHQ Guide: https://www.pass4leader.com/NAHQ/CPHQ-exam.html

- CPHQ Latest Test Guide ☐ CPHQ Valid Test Registration ☐ Free CPHQ Learning Cram ☐ Immediately open ☀ www.practicevce.com ☐☀☐ and search for " CPHQ " to obtain a free download ↪CPHQ Valid Exam Practice
- Free CPHQ Learning Cram ☐ Valid CPHQ Exam Vce ☐ New CPHQ Exam Bootcamp ☐ 「 www.pdfvce.com 」 is best website to obtain [CPHQ] for free download ☐Valid CPHQ Dumps
- Reasons To Buy NAHQ CPHQ Exam Dumps ☐ Search for ➡ CPHQ ☐ on ➡ www.pdfdumps.com ☐☐☐ immediately to obtain a free download ☐New CPHQ Exam Bootcamp
- 2026 Newest NAHQ CPHQ: Certified Professional in Healthcare Quality Examination Valid Exam Testking ☐ Search for ➡ CPHQ ☐☐☐ on （ www.pdfvce.com ） immediately to obtain a free download ☐Frenquent CPHQ Update
- CPHQ Study Guide - CPHQ Free Download pdf - CPHQ Latest Pdf Vce ☐ Search for ➡ CPHQ ☐ and easily obtain a free download on （ www.testkingpass.com ） ☐Certification CPHQ Exam Cost
- Top CPHQ Valid Exam Testking | Efficient Exam CPHQ Guide: Certified Professional in Healthcare Quality Examination 100% Pass ☐ Search for 【 CPHQ 】 and download it for free immediately on ✔ www.pdfvce.com ☐✔☐ ✓ Valid CPHQ Test Online
- Pass Guaranteed 2026 NAHQ Efficient CPHQ Valid Exam Testking ☐ Simply search for ☀ CPHQ ☐☀☐ for free download on ➹ www.dumpsquestion.com ☐ ☐Valid CPHQ Test Online
- Pass Guaranteed 2026 NAHQ Efficient CPHQ Valid Exam Testking ☐ Easily obtain free download of " CPHQ " by searching on " www.pdfvce.com " ☐New CPHQ Exam Bootcamp
- Valid CPHQ Guide Files ☐ Valid CPHQ Vce Dumps ☐ CPHQ New Study Materials ☐ Open website [www.exam4labs.com] and search for 「 CPHQ 」 for free download ☐Detailed CPHQ Study Plan
- Valid CPHQ Vce Dumps ☐ CPHQ New Study Materials ☐ Valid CPHQ Exam Vce ☐ Search for ☐ CPHQ ☐ and download it for free immediately on ☐ www.pdfvce.com ☐ ☐Detailed CPHQ Study Plan
- CPHQ Valid Test Registration ☐ CPHQ New Study Materials ☐ Frenquent CPHQ Update ☐ Simply search for ☀ CPHQ ☐☀☐ for free download on 【 www.practicevce.com 】 ☐Free CPHQ Learning Cram
- www.stes.tyc.edu.tw, www.stes.tyc.edu.tw, www.stes.tyc.edu.tw, bbs.t-firefly.com, kumu.io, www.stes.tyc.edu.tw, www.stes.tyc.edu.tw, www.stes.tyc.edu.tw, www.stes.tyc.edu.tw, www.stes.tyc.edu.tw, Disposable vapes

P.S. Free & New CPHQ dumps are available on Google Drive shared by Pass4Leader: https://drive.google.com/open?id=1-TD9oLyUdcLjI9kynDQWT4L2knh6S9rE