

# CPHQ Exam Duration & Dumps CPHQ Torrent

## CPHQ (Certified Professional in Healthcare Quality) Exam Prep

Which of the following action plans is the first step in correcting inappropriate blood usage in an emergency department?

- A. In-service on ordering blood usage for the physicians
- B. elimination of wasted blood
- C. improvements in documentation
- D. development of a new procurement procedure ✓✓ ANSWER
- A. in-service on ordering blood usage for the physicians

Which of the following is most appropriate in preparation for an external survey of a healthcare facility?

- A. Assign key staff to answer all questions.
- B. Ask department heads to prepare a presentation for the survey team.
- C. Educate staff about the types of questions they may be asked.
- D. Set up teams to make a good showing for the survey. ✓✓ ANSWER
- C. Educate staff about the types of questions they may be asked.

The following table shows the percentage of hospital-acquired pressure ulcers: Which of the following should the healthcare quality professional do next?

- A. Implement a new pressure ulcer protocol.
- B. Re-educate staff.
- C. Continue to track and trend the data.
- D. Conduct a focused analysis of pressure ulcer cases ✓✓ ANSWER
- D. Conduct a focused analysis of pressure ulcer cases

Leadership can best integrate performance improvement within an organization through:

- A. multidisciplinary teams.
- B. newsletters.
- C. focus groups.
- D. seminars. ✓✓ ANSWER
- A. multidisciplinary teams  
(best integrate performance improvement by promoting an interdisciplinary approach to the process and including multiple subject matter experts.)

A medication error occurred and resulted in a severe adverse outcome. In addition to informing the patient and/or family, a healthcare quality professional should:

- A. perform a regression analysis.
- B. implement new technology.

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NAHQ CPHQ Exam is a comprehensive assessment that evaluates the ability of healthcare quality professionals to improve quality outcomes and patient safety. CPHQ exam covers a wide range of topics, including quality management, performance measurement, patient safety, and healthcare regulations. Candidates who pass the exam are considered experts in healthcare quality and are well-equipped to lead quality improvement initiatives.

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Achieving the NAHQ CPHQ Certification is not only a personal accomplishment, but it also benefits the healthcare organization and patients. Certified professionals are equipped with the knowledge and skills to improve healthcare quality and patient safety, which can lead to better outcomes and experiences for patients. Additionally, healthcare organizations that employ certified professionals can increase their reputation and credibility in the industry.

## Best Training Courses for CPHQ Exam

The approach of studying for this exam may vary depending on your learning capacity. As suggested by NAHQ, you can spend between 6 weeks to 3 months preparing for it. And to support your quest to career advancement, below are the most beneficial training resources for a successful performance.

- **Virtual Course (Instructor-Led)**

Do you want your learning to be administered by an expert? If yes, then enroll in the instructor-led course. This virtual training runs for over two weeks (excluding weekends), demonstrating the essential subjects associated with a quality healthcare career. The contents provided in the course are aligned with the CPHQ test blueprint, which means you will be on the right track while acquiring new insights. It begins with organizational guidance and then continues with patient safety and process improvement. The last core section is about health data analytics.

Plus, the instructor can share relevant tips that you can apply during your exam and real-world job. Don't forget to check the schedule ahead so you can plot the days properly. Generally, these are listed by month, with an overview of the dates covered.

- **CPHQ Review Course (Self-paced)**

Another material suggested by NAHQ is the self-paced review course. This is a great follow-up after the instructor-led training because it helps in underlining your exam readiness. However, this can also be a stand-alone material if you can't allocate a specific schedule for the virtual sessions. No worries because this program also revolves around the official exam outline. So, if you want to maximize your time at your own comfort, you can avail of this self-paced option and study independently in a digital setup. And in comparison to the instructor-led course, this one offers up to 1-year access to the contents.

Through the detailed lectures, it makes you comprehend the relevance of the healthcare profession. These involve proper accreditation, readiness activities, and recognition programs in delivering quality medical oversight. Alongside these topics, your skills in accurately handling data, performing risk management tasks, and identifying patient safety priorities are also reinforced.

## NAHQ Certified Professional in Healthcare Quality Examination Sample Questions (Q167-Q172):

### NEW QUESTION # 167

An effective method to increase an organization's board of directors engagement in patient safety is to

- A. structure the board agenda so that quality and safety are given the same amount of attention as financial issues.
- B. foster teamwork and good communication at all levels of the organization and conduct training for both of these skill sets.
- C. focus on improvement projects that are important to the medical staff in the organization.
- D. guide them through a recent failure mode and effects analysis (FMEA) that was conducted prior to the launch of a new technology.

**Answer: A**

Explanation:

To increase the board of directors' engagement in patient safety, structuring the board agenda to give quality and safety the same amount of attention as financial issues is the most effective method. This ensures that patient safety is a priority at the highest level of organizational governance, signaling its importance to the entire organization. It also provides the board with regular, detailed updates on safety initiatives, outcomes, and areas needing attention.

\* Fostering teamwork and communication (A): While important, this approach is more relevant to operational levels rather than engaging the board directly.

\* Focusing on improvement projects important to the medical staff (C): This can enhance engagement, but broader board engagement is better achieved through strategic prioritization of quality and safety.

\* Guiding them through a recent FMEA (D): This is valuable for education, but not as impactful for ongoing engagement compared to consistently prioritizing safety on the board's agenda.

## References

- \* NAHQ Body of Knowledge: Governance and Leadership in Quality Improvement
  - \* NAHQ CPHQ Exam Preparation Materials: Board Engagement in Quality and Safety
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### NEW QUESTION # 168

A healthcare quality professional is planning to discuss a problem related to delays in home-care visits with the home-care team. Which of the following is the most effective approach?

- A. Share personal knowledge of home care
- B. Communicate the quality assessment committee's action plan
- C. State the cause of the problem and suggest a solution
- **D. Present the problem and ask for feedback**

#### Answer: D

#### Explanation:

The NAHQ CPHQ exam blueprint emphasizes collaborative leadership and staff engagement as essential for effective quality improvement.

Option B is correct because presenting the problem and soliciting feedback encourages frontline involvement, leverages team expertise, and promotes ownership of solutions. This approach supports a just culture and continuous improvement.

Options A, C, and D are top-down approaches that limit engagement and may reduce buy-in. The CPHQ framework stresses that those closest to the work are best positioned to identify root causes and sustainable solutions.

Therefore, engaging the team through discussion and feedback is the most effective and exam-aligned approach.

### NEW QUESTION # 169

Which of the following quality improvement tools is best for risk assessment of a new or modified process?

- A. 5 whys
- B. SWOT analysis
- **C. failure mode and effects analysis (FMEA)**
- D. force field analysis

#### Answer: C

#### Explanation:

Failure Mode and Effects Analysis (FMEA) is a systematic method for evaluating a process to identify where and how it might fail, to assess the relative impact of different failures, and to identify the parts of the process that are most in need of change. FMEA includes review of the following:

- \* Steps in the process: Identify what could go wrong during each step.
- \* Failure modes: Identify potential failure modes for each step.
- \* Failure effects: For each failure mode, identify potential effects.
- \* Severity: Assign a severity rating for each effect of failure.
- \* Occurrence: Assign an occurrence rating for each failure mode.
- \* Detection: Assign a detection rating for each failure mode and effect.
- \* Risk Priority Number (RPN): Calculate the RPN for each effect.

FMEA is particularly useful in healthcare for risk assessment of a new or modified process because it not only identifies potential failures, but also prioritizes them based on their impact, frequency of occurrence, and detectability, allowing for targeted and efficient process improvement.

#### References:

- \* Quality improvement tools are standalone strategies or processes that can help you better understand, analyze, or communicate your QI efforts<sup>1</sup>.
- \* The 7 Basic Quality Tools for Process Improvement<sup>2</sup>.
- \* A guide to quality improvement tools<sup>3</sup>.

### NEW QUESTION # 170

Which of the following most effectively reduces medication errors?

- A. Shifting responsibility for medications to the patients
- **B. Implementing computerized prescribing orders**
- C. Using medications before their expiration date
- D. Restricting drugs to the hospital formulary

**Answer: B**

Explanation:

Reducing medication errors requires system-based interventions that minimize human error and enforce safety checks.

Option A (Shifting responsibility for medications to the patients): This increases error risk, as patients may lack expertise or consistency.

Option B (Restricting drugs to the hospital formulary): Formulary restrictions standardize medications but do not directly address prescribing or administration errors.

Option C (Using medications before their expiration date): This prevents use of ineffective drugs but does not address common error sources like wrong doses.

Option D (Implementing computerized prescribing orders): This is the correct answer. The NAHQ CPHQ study guide states, "Computerized provider order entry (CPOE) systems reduce medication errors by incorporating decision support, allergy checks, and standardized protocols" (Domain 1). CPOE is a proven safety intervention.

CPHQ Objective Reference: Domain 1: Patient Safety, Objective 1.7, "Use technology to reduce errors," emphasizes CPOE for medication safety. The NAHQ study guide notes, "CPOE significantly reduces prescribing errors through automated checks" (Domain 1).

Rationale: CPOE's systemic safeguards make it the most effective for reducing medication errors, as per CPHQ's safety principles.

Reference: NAHQ CPHQ Study Guide, Domain 1: Patient Safety, Objective 1.7.

#### NEW QUESTION # 171

The main goal of a clinical pathway/guideline is to

- A. ensure precise treatment plans are followed.
- **B. guide the patient's care toward identified outcomes.**
- C. document practitioner variances.
- D. assist in documentation of care.

**Answer: B**

Explanation:

\* A clinical pathway/guideline is a tool that helps healthcare providers to deliver evidence-based, patient-centered, and standardized care for a specific condition or population<sup>1,2</sup>.

\* The main goal of a clinical pathway/guideline is to improve the quality and consistency of care, reduce unnecessary variations, optimize outcomes, and enhance patient satisfaction<sup>1,2,3</sup>.

\* A clinical pathway/guideline is not meant to assist in documentation of care (option A), although it may include documentation requirements as part of the quality improvement process<sup>1</sup>.


\* A clinical pathway/guideline is not meant to document practitioner variances (option B), although it may allow for deviations from the recommended care based on individual patient needs and preferences, clinical judgment, and resource availability<sup>1,2</sup>. Variances should be monitored and evaluated for their impact on outcomes and quality<sup>1</sup>.

\* A clinical pathway/guideline is not meant to ensure precise treatment plans are followed (option D), although it may provide recommendations for specific interventions, tests, or medications based on the best available evidence<sup>1,2</sup>. A clinical pathway/guideline should be flexible and adaptable to the local context and the patient's situation<sup>1,2</sup>. References: 1: Clinical Pathways 2: NICE clinical guidelines 3: Clinical Practice Guidelines

#### NEW QUESTION # 172

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