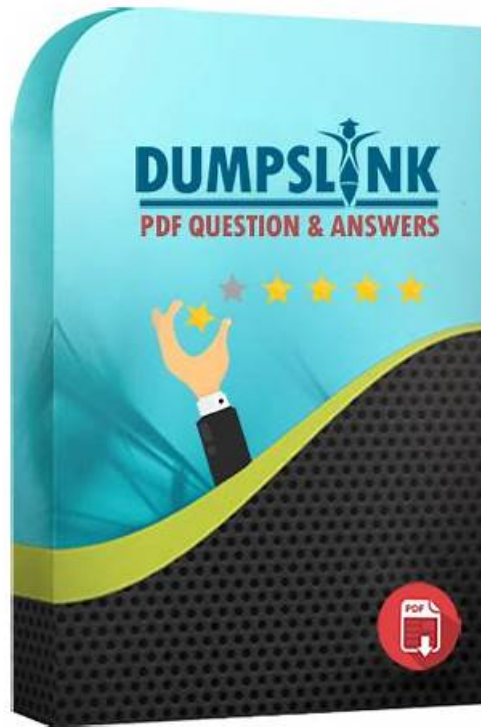


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Medical Professional Certified Healthcare Facility Manager (CHFM) certification exam Sample Questions (Q99-Q104):

NEW QUESTION # 99

Child abduction system evaluation is best accomplished by

- A. security professionals.
- B. administration.
- C. risk managers.
- D. the safety committee.

Answer: A

Explanation:

The evaluation of child abduction systems-such as infant security alarms, electronic tagging devices, and controlled access systems-falls under the expertise of security professionals. These professionals are trained to test, monitor, and validate the effectiveness of electronic security and surveillance systems. Their role ensures that abduction-prevention technology is properly installed, maintained, and capable of responding effectively in an emergency.

* Correct Answer (B. security professionals): According to the CHFM exam content outline under Compliance, healthcare facilities are expected to implement and evaluate security measures that meet regulatory and safety requirements. The responsibility for the technical and functional evaluation of systems like infant abduction alarms lies with trained security staff.

* Incorrect Options:

* A. administration: While hospital administration sets policy and allocates resources, they are not directly responsible for evaluating technical systems.

* C. the safety committee: Safety committees review incidents and provide oversight but do not conduct system-level technical evaluations.

* D. risk managers: Risk managers focus on identifying potential liability and compliance issues but rely on security professionals to conduct the detailed evaluation of child abduction systems.

Relevance to CHFM Compliance Domain:

Within the Compliance domain of the CHFM exam, managers must demonstrate knowledge of regulatory standards for security in healthcare facilities, particularly in sensitive areas such as maternity wards.

Evaluation of abduction-prevention systems aligns directly with security operations, which are managed and verified by trained security professionals to ensure compliance with The Joint Commission (TJC), CMS, and industry best practices.

References:

American Hospital Association (AHA), CHFM Candidate Handbook - Exam Content Outline, "Compliance" domain: includes responsibilities for security and safety system evaluation.

The Joint Commission (TJC), Environment of Care Standards - Requirements for infant and pediatric abduction prevention measures.

NFPA 99: Health Care Facilities Code - Security system integration into patient safety measures.

NEW QUESTION # 100

When balancing cost and function of access control needs for a single person office where access is restricted to the occupant, the best solution is a

- A. key lock.
- B. badge access lock.
- C. keypad lock.
- D. biometric lock.

Answer: A

Explanation:

For a single-user office, the most cost-effective and functional choice is a key lock. Other options (keypad, badge, biometric) are appropriate for higher-security or multi-user access points but are excessive in cost and complexity for one occupant.

B). Key lock (Correct): Meets the requirement simply and inexpensively.

- A). Keypad lock: Adds unnecessary technology and cost.
- C). Biometric lock: High cost, appropriate for sensitive areas only.
- D). Badge access lock: Requires system integration and ongoing management not justified for a single office.

References:

AHA/CHFM Candidate Handbook - Administration domain (cost vs. function decision-making).

ASHE Security Guidelines for Healthcare Facilities.

NEW QUESTION # 101

A facilities department's annual expense budget is \$5,000,000. The actual expenses for the first 4 months were \$500,000, \$650,000, \$700,000, and \$450,000. What is the monthly spending average required to maintain the original annual budget expectations?

- A. \$416,667
- B. \$500,000

Step-by-Step Calculation:

Total spent first 4 months = $500,000 + 650,000 + 700,000 + 450,000 = \$2,300,000$.

Remaining budget = $\$5,000,000 - \$2,300,000 = \$2,700,000$.

Remaining months = $12 - 4 = 8$ months.

Required monthly average = $\$2,700,000 \div 8 = \$337,500$.

- C. \$350,000
- D. \$337,500

Answer: D

Explanation:

To stay within the \$5,000,000 annual budget, the facilities department must reduce monthly spending to \$337,500 for the remaining 8 months.

Reference: CHFM Candidate Handbook - Financial Management domain, budgeting and forecasting.

NEW QUESTION # 102

An administrator is considering outsourcing the BioMed function to reduce cost. The low-bid base price for outside annual inspection and testing service is \$180,000 with an \$80/hr repair labor rate and a \$120/hr call-in labor rate. The BioMed department currently has an annual labor budget of \$240,000. Assuming an estimate of 600 hours of repair labor and 100 hours of call-in labor, how much will the administrator save annually with the outsourcing option?

- A. \$48,000
- B. \$0
- C. \$12,000
- D. \$80,000

Step-by-Step Calculation:

Current in-house cost: \$240,000.

Outsourcing cost:

Base price: \$180,000

Repair: $600 \text{ hrs} \times \$80/\text{hr} = \$48,000$

Call-in: $100 \text{ hrs} \times \$120/\text{hr} = \$12,000$

Total outsourcing = $\$180,000 + \$48,000 + \$12,000 = \$240,000$

Difference: $\$240,000 - \$240,000 = \$0$

Answer: B

Explanation:

The outsourcing scenario matches the current in-house budget exactly; therefore, no savings are achieved.

This type of financial analysis is common in the CHFM Financial Management domain.

NEW QUESTION # 103

	Before	After
Landfill at \$40/ton	600T	390T
Compactor pulls at \$200/pull	104	52
Cardboard recycling revenue at \$30/ton	0	200T
Aluminum recycling revenue at \$0.30/lb	0	2T

A facility has the following changes in annual operations because of a recycling program:

Landfill at \$40/ton: Before 600T # After 390T

Compactor pulls at \$200/pull: Before 104 # After 52

Cardboard recycling revenue at \$30/ton: Before 0 # After 200T

Aluminum recycling revenue at \$0.30/lb: Before 0 # After 2T

What was the gross revenue from the recycling effort?

- A. \$7,200
- B. \$6,000
- C. \$6,600
- D. \$18,000

Step-by-Step Calculation:

Cardboard recycling revenue:

200 tons \times \$30/ton = \$6,000

Aluminum recycling revenue:

2 tons \times 2,000 lbs/ton = 4,000 lbs

4,000 lbs \times \$0.30/lb = \$1,200

Total Gross Revenue:

\$6,000 + \$1,200 = \$7,200

Answer: A

Explanation:

The CHFM exam Financial Management domain requires knowledge of cost savings and revenue generation calculations from operational changes such as recycling initiatives. In this example, gross revenue is calculated by summing the total recycling income streams (cardboard and aluminum).

Correct Answer (C. \$7,200): Derived from combining \$6,000 (cardboard) and \$1,200 (aluminum) revenue.

Other options are incorrect because:

A (\$6,000): Considers cardboard only.

B (\$6,600): Misapplies aluminum tonnage conversion.

D (\$18,000): Exaggerates revenue beyond calculated amounts.

References:

American Hospital Association (AHA), CHFM Candidate Handbook - Financial Management domain includes evaluating cost savings and revenue streams in facility operations.

Environmental Protection Agency (EPA), Waste Management and Recycling Revenue Guidance - Defines commodity values for recyclable materials.

NEW QUESTION # 104

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