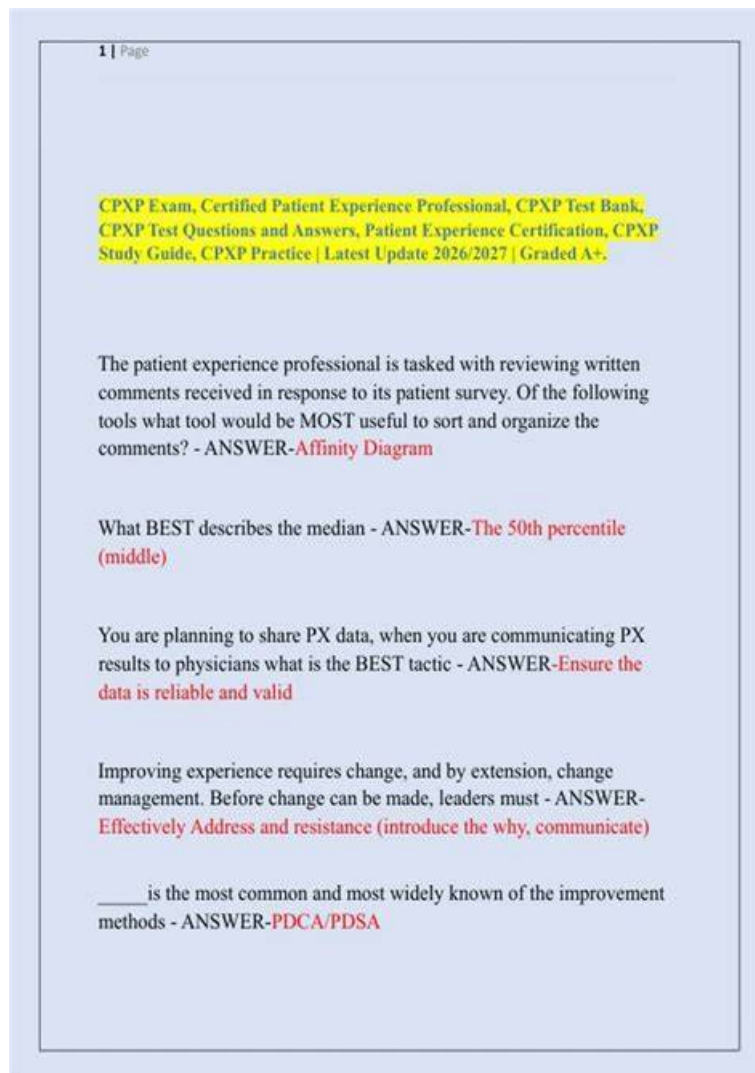


CPXP Übungstest: Certified Patient Experience Professional & CPXP Braindumps Prüfung



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The Beryl Institute CPXP Exam Syllabus Topics:

Section	Objectives
	- Experience strategy development
Topic 1: Strategy and Design	1. Experience transformation initiatives 2. Service design and journey mapping
	- Organizational leadership commitment to patient experience
Topic 2: Leadership and Accountability	1. Accountability structures and roles 2. Executive sponsorship and governance

Topic 3: Culture and Engagement	- Building a patient-centered culture • 1. Staff engagement and empowerment • 2. Values-based behaviors and alignment - Patient experience measurement systems
Topic 4: Measurement, Analysis, and Performance Improvement	• 1. Survey tools and feedback mechanisms • 2. Data analysis and reporting - Foundations of human experience in healthcare
Topic 5: Human Experience Principles	• 1. Safety, dignity, and respect in care delivery • 2. Communication and empathy - Engagement strategies
Topic 6: Patient, Family, and Community Engagement	• 1. Patient and family advisory councils • 2. Community partnership development

>> CPXP Prüfungsmaterialien <<

CPXP Examengine - CPXP Lernressourcen

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The Beryl Institute Certified Patient Experience Professional CPXP Prüfungsfragen mit Lösungen (Q49-Q54):

49. Frage

Who is ultimately responsible for ensuring that patient experience is strategically aligned with the goals of the organization?

- A. Chief nursing officer
- B. Chief operating officer
- C. Chief experience officer
- **D. Chief executive officer**

Antwort: D

Begründung:

This question falls under Organizational Culture and Leadership, which in the CPXP framework emphasizes that senior leadership holds ultimate accountability for aligning patient experience with organizational strategy. The Chief Executive Officer (CEO) is responsible for setting the vision, priorities, and strategic direction of the entire organization, including integrating patient experience into core business objectives.

While roles like the Chief Experience Officer or Chief Nursing Officer may lead or operationalize experience initiatives, they do not carry the same level of enterprise-wide authority as the CEO. CPXP guidance highlights that sustainable patient experience improvement requires top-down commitment, leadership modeling, and strategic alignment, all of which originate at the CEO level to ensure accountability across all departments and functions.

50. Frage

An increasing number of patients and family members believe that their treatment plans are wrong. Unit leaders report high census, staffing challenges, and difficult patient behaviors. What is the FIRST step a patient experience professional should take to address this situation?

- A. Seek additional information by reaching out to patients and families to ask about their involvement in the care process.
- B. Create communications training for front-line staff and physicians.
- C. Seek additional information by reaching out to friends and colleagues who have been patients and ask whether they have had similar experiences.
- D. Work with unit leaders to develop and add a custom question to the patient experience survey.

Antwort: A

Begründung:

This question aligns with Measurement and Analysis , which emphasizes understanding the root cause of experience issues before implementing solutions. The key phrase is "FIRST step," which in CPXP practice is always to gather meaningful, direct feedback from the actual patients and families involved . Option B is correct because it prioritizes real-time, qualitative insight into patient perceptions, particularly around involvement in care decisions—an essential driver of trust and experience. Option A (training) is premature without understanding the underlying issue. Option C (survey changes) is slower and less actionable for immediate understanding. Option D is not valid, as it relies on anecdotal and non-representative input. CPXP stresses that effective improvement begins with listening to the voice of the patient to inform targeted interventions .

51. Frage

While facilitating a virtual patient and family advisory council meeting, which approach may help elicit group engagement?

- A. Private message individual participants.
- B. Direct responses to the chat function.
- C. Create an agenda with multiple presentations.
- D. Encourage cameras be turned on.

Antwort: D

Begründung:

This question aligns with Partnership and Advocacy , which focuses on engaging patients and families as active partners. In virtual environments, fostering connection and trust is essential for meaningful participation. Option A (Encourage cameras be turned on) is the best approach because it promotes visual connection, nonverbal communication, and a sense of presence , all of which are critical for engagement and relationship-building. Seeing participants helps facilitators read reactions, encourage dialogue, and create a more inclusive and interactive environment. Option B limits interaction to text, which may reduce depth of engagement. Option C may isolate individuals rather than promote group participation. Option D shifts focus to passive listening rather than active contribution. CPXP principles emphasize creating environments that encourage open dialogue, trust, and shared partnership.

52. Frage

Which strategy should the patient experience professional employ to help support the successful implementation of a new rewards and recognition program?

- A. Ask managers to include the program in their daily huddles.
- B. Implement the program immediately and begin providing recognition as quickly as possible.
- C. Identify champions and ask for feedback throughout the planning and implementation process.
- D. Create a presentation for staff ahead of the rollout, and send weekly reminders.

Antwort: C

Begründung:

This question aligns with Organizational Culture and Leadership , particularly change management and staff engagement strategies. Option C is correct because identifying champions and gathering feedback throughout planning and implementation ensures buy-in, collaboration, and sustained adoption . CPXP principles emphasize that successful initiatives require engaged stakeholders who advocate for change and influence peers . Champions act as role models, reinforce desired behaviors, and help address resistance. Additionally, incorporating feedback creates a sense of ownership and ensures the program is relevant and effective. Options A and B are more top-down approaches and may not foster engagement, while D is helpful but limited in scope. By leveraging champions and continuous feedback, organizations build stronger alignment, improve participation, and increase the likelihood of long-term success in recognition and engagement initiatives.

53. Frage

In which of the following methodologies for process improvement is emotional mapping used as an analytical tool?

- A. Lean management
- **B. Experience-based co-design**
- C. Plan-Do-Check-Act
- D. Total quality management

Antwort: B

Begründung:

This question aligns with Design and Innovation, particularly patient-centered improvement methodologies.

Experience-based co-design (EBCD) is the correct answer because it explicitly incorporates emotional mapping as a key analytical tool. Emotional mapping captures how patients and families feel at different points in their care journey, identifying "touchpoints" that significantly impact the experience. This method enables healthcare teams to understand not just processes, but the emotional highs and lows that shape perceptions of care. Options A (PDCA), C (TQM), and D (Lean) focus primarily on process efficiency and performance improvement, but they do not specifically use emotional mapping as a core tool. CPXP principles emphasize that understanding emotional experiences is essential to designing truly patient-centered improvements, making EBCD a powerful methodology.

54. Frage

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