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The Beryl Institute Certified Patient Experience Professional Sample Questions (Q129-Q134):

NEW QUESTION # 129

Management views turnover as a cause for low patient experience scores. Which is the BEST question for the patient experience professional to ask to give insight into this issue?

- A. Is there a retention bonus in place?
- B. What is the turnover rate?
- C. Is the rate improved over the prior year?
- D. Why do staff leave?

Answer: D

Explanation:

This question aligns with Organizational Culture and Leadership , which focuses on understanding workforce engagement, culture drivers, and their impact on patient experience outcomes. The most effective approach in CPXP practice is to move beyond

surface-level metrics and identify root causes of issues affecting staff and, ultimately, patient care. Option A ("Why do staff leave?") is the strongest because it seeks qualitative insight into underlying factors such as burnout, leadership effectiveness, communication gaps, and work environment—all of which directly influence patient experience. Options B and D focus only on quantitative trends, and C is a narrow intervention rather than an exploratory question. CPXP emphasizes that improving experience requires understanding staff needs and culture, as engaged staff are essential to delivering high-quality, patient-centered care.

NEW QUESTION # 130

Which is the MOST commonly reported cause of adverse events affecting limited English proficiency /culturally diverse patients?

- **A. Family members, friends, and nonqualified staff are used as medical interpreters.**
- B. Administrators fail to hire bilingual staff to fulfill appropriate language services.
- C. Professional interpreters are not adequately trained to translate in medically challenging situations.
- D. Staff overlook cultural nuances, creating assumptions that affect patient safety.

Answer: A

Explanation:

This question aligns with Partnership and Advocacy, particularly health equity, communication, and patient safety. Option B is correct because one of the most commonly reported causes of adverse events for patients with limited English proficiency is the use of untrained interpreters, such as family members, friends, or unqualified staff. CPXP principles emphasize that improper interpretation can lead to miscommunication, omission of critical information, and medical errors, directly impacting patient safety and outcomes.

Professional medical interpreters are trained to accurately convey complex medical information and maintain confidentiality. While options A, C, and D may contribute to disparities, the use of unqualified interpreters is the most consistently identified risk factor. Ensuring access to qualified language services is essential for safe, effective, and equitable patient-centered care.

NEW QUESTION # 131

What is the relationship between domains and the overall score within patient experience/satisfaction data?

- **A. Impact**
- B. Trend
- C. Average
- D. Correlation

Answer: A

Explanation:

This question aligns with Measurement and Analysis, specifically how different domains (e.g., communication, responsiveness, environment) relate to overall patient experience scores. Option C (Impact) is correct because it describes how strongly each domain influences the overall score. CPXP principles emphasize using driver analysis to identify which domains have the greatest effect on overall patient perception, allowing organizations to prioritize improvement efforts strategically. While correlation (B) measures statistical relationships, impact goes further by identifying which areas most influence outcomes.

Average (A) simply summarizes data, and trend (D) shows changes over time. Understanding impact enables healthcare organizations to focus resources on the domains that will yield the greatest improvement in overall patient experience scores.

NEW QUESTION # 132

Which of the following improvement methods includes developing an overview and timeline of the patient's experience across the continuum of care?

- A. Pareto principle
- **B. Process mapping**
- C. SWOT analysis
- D. Lean

Answer: B

Explanation:

This question falls under Design and Innovation , which focuses on tools and methodologies used to improve patient experience. Process mapping is the correct answer because it involves visually outlining the sequence of steps, interactions, and touchpoints a patient experiences across the continuum of care. It helps teams understand workflows, identify gaps, delays, redundancies, and opportunities for improvement. Option A (Lean) is a broader methodology that may use process mapping but does not specifically define it. Option B (Pareto principle) focuses on prioritizing issues based on impact, and Option D (SWOT analysis) evaluates strengths, weaknesses, opportunities, and threats. CPXP emphasizes that understanding the patient journey through tools like process mapping is essential to designing more efficient, patient-centered care experiences.

NEW QUESTION # 133

Which communication framework is BEST utilized to frame crucial conversations between care team members?

- A. SBAR
- B. REDE
- C. LAST
- D. ADKAR

Answer: A

Explanation:

This question aligns with Partnership and Advocacy , specifically effective communication among care team members to ensure safe, coordinated, and patient-centered care. Option D (SBAR) is correct because it is a widely used, structured communication framework designed for clear, concise, and standardized information exchange between healthcare professionals . SBAR stands for Situation, Background, Assessment, and Recommendation, and is especially effective during critical conversations such as handoffs, escalations, or urgent updates. Option A (ADKAR) is a change management model, Option B (LAST) is used for service recovery communication with patients, and Option C (REDE) focuses on patient-provider relationship building. CPXP principles emphasize that structured communication tools like SBAR improve clarity, reduce errors, and enhance teamwork, ultimately improving patient safety and experience.

NEW QUESTION # 134

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