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When considering the use of an external subject matter expert (SME), which of the following is most critical?

- A. leadership's personal preference
- B. geographic location of the SME
- C. cost of the SME's services
- D. references of the SME - ✓✓D. references of the SME

The positive clinical reputation provides credibility support to the project.

To avoid misinterpreting variances, which of the following statistical tools should be used?

- A. control chart
- B. fishbone diagram
- C. force field analysis
- D. Pareto chart analysis - ✓✓A. control chart

Control charts exhibit points between control limits, therefore displaying the variation.

An operating room circulating nurse reported that the instrument count indicated a missing clamp. X-ray findings were negative, and the patient showed no adverse effects. This occurrence is an example of which of the following?

- A. claims management
- B. malpractice
- C. clinical incompetency
- D. potentially compensable event - ✓✓D. potentially compensable event

Although the clamp was not found, this has potential to become a compensable event. A potentially compensable event is an event for which there is risk of future claim or settlement.

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NAHQ CPHQ (Certified Professional in Healthcare Quality Examination) Exam is a professional certification exam for individuals who are interested in pursuing a career in healthcare quality management. The CPHQ Certification is recognized as the gold standard in the healthcare quality industry and is a highly sought-after qualification by healthcare employers worldwide. CPHQ exam is administered by the National Association for Healthcare Quality (NAHQ) and is designed to evaluate the knowledge, skills, and competencies of healthcare professionals in the field of quality management.

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NAHQ Certified Professional in Healthcare Quality Examination Sample Questions (Q569-Q574):

NEW QUESTION # 569

A physician's profile shows a 4% readmission rate following outpatient gallbladder surgery, which is significantly higher than the rate for their peers.

What action should the quality professional take next?

- A. Review a sample of recent individual cases of the physician's readmissions.
- B. Compare the physician's readmission rate with peer physicians.
- C. Review the physician's privileges against the procedures performed.
- D. Report the surgeon to the medical board.

Answer: A

Explanation:

When a physician's readmission rate is significantly higher than their peers, the next step for a quality professional should be to review a sample of recent individual cases of the physician's readmissions (Option D). This will help identify any patterns or issues that could be contributing to the higher readmission rate.

Reporting the surgeon to the medical board (Option A) is a drastic step that should only be taken if there is evidence of serious misconduct or incompetence. Reviewing the physician's privileges against the procedures performed (Option B) could be useful, but it would not directly address the issue of the high readmission rate.

Comparing the physician's readmission rate with peer physicians (Option C) has already been done, as stated in the question.

Therefore, the most appropriate next step is to review individual cases to gain a deeper understanding of the reasons for the high readmission rate.

NEW QUESTION # 570

The following diagram shows:



- A. None of these
- **B. API Improvement model**
- C. Quality improvement
- D. Baldrige criteria for improvement

Answer: B

NEW QUESTION # 571

The downside of _____ is cost. It is very costly and time consuming, and it often requires several full time data analysts.

- A. Retrospective approach
- **B. Prospective data collection approach**
- C. Scanners
- D. Flow charts

Answer: B

NEW QUESTION # 572

Recognition of the formal and informal structure of an organization is necessary when implementing a quality improvement program because

- A. organizational structure should have low variability.
- B. teams need to be self-directing.
- **C. informal leaders can be influential.**
- D. quality improvement programs must consult all levels before recommending policies.

Answer: C

Explanation:

Recognizing the formal and informal structure of an organization is essential when implementing a quality improvement program because informal leaders can be influential in the success or failure of such initiatives.

Here's why:

Role of Informal Leaders: Informal leaders, who may not hold official titles or positions of authority, often have significant influence over their colleagues due to their experience, expertise, or personality. They can sway opinions, encourage participation, and foster a culture of cooperation, or conversely, they can resist changes and discourage others from engaging with new initiatives.

Building Consensus and Support: To ensure the success of a quality improvement program, it is crucial to identify and engage these informal leaders early in the process. By gaining their support, the program can benefit from their influence in motivating others, addressing concerns, and ensuring buy-in from the wider workforce.

Navigating Organizational Dynamics: Understanding the informal structure helps in navigating the complexities of organizational dynamics. It allows the program leaders to anticipate potential resistance, address it proactively, and leverage the existing informal networks to disseminate information and encourage adoption of new practices.

Complementing Formal Structures: While formal structures define the official hierarchy and processes, the informal structure often represents how work actually gets done on the ground. Recognizing and integrating both aspects ensures a more comprehensive approach to implementing quality improvements, making the changes more sustainable and effective.

Reference: (Based on Healthcare Quality NAHQ documents and resources)

NAHQ Leadership and Organizational Change Modules.

CPHQ Study Guide, Section on Organizational Dynamics and Leadership.

Quality Improvement in Healthcare, Article on the Role of Informal Leaders.

NEW QUESTION # 573

An organization recently completed an analysis of safety events from the last year. The majority of events were related to the following:

- * provider order transcription errors (5%)
- * wrong medication given to the patient (12%)
- * adverse reaction related to medication allergies (7%)
- * Inappropriate medication dose administered (10%)
- * delayed antibiotic administration (10%)

Which of the following would be most helpful to enhance patient safety In this organization?

- A. automated dispensing machine
- B. bar code medication administration
- C. verbal order read-back
- **D. computerized provider order entry**

Answer: D

Explanation:

The question is about enhancing patient safety in an organization that has experienced a variety of safety events, most notably related to medication errors such as wrong medication given to the patient, inappropriate medication dose administered, and delayed antibiotic administration.

Computerized Provider Order Entry (CPOE) systems can significantly reduce transcription errors¹. These systems allow direct entry of medical orders by the person with the licensure to do so, which are then transmitted directly to the relevant department. This eliminates the need for handwritten or verbal orders that can be misinterpreted or lost¹.

CPOE systems can also incorporate decision support systems that provide alerts for potential medication errors, such as drug-drug interactions, allergies, or incorrect dosages¹. This can help prevent wrong medication being given to the patient or inappropriate medication doses being administered.

While all the options provided can contribute to patient safety, the CPOE system addresses multiple issues identified in the safety events analysis, making it the most comprehensive solution among the options provided¹. Therefore, implementing a CPOE system would be the most helpful to enhance patient safety in this organization¹.

NEW QUESTION # 574

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