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NAHQ Certified Professional in Healthcare Quality Examination Sample Questions (Q213-Q218):

NEW QUESTION # 213

During analysis of patient falls, a quality professional notes that there has been an increase in the fall rate over the last 3 months. What other data should be analyzed first to determine potential causes?

- A. nurse to staff ratio
- B. utilization of chemical restraints
- C. average daily patient census
- D. fall assessment protocol compliance

Answer: D

Explanation:

Explanation: Analyzing fall assessment protocol compliance (C) is the first step to determine causes of increased fall rates, as it evaluates whether risk assessments and interventions are implemented correctly.

Census (A), chemical restraints (B), and staffing ratios (D) are secondary factors. NAHQ emphasizes process- related data for safety analysis.

NAHQ CPHQ Study Guide, Patient Safety Section, "Fall Prevention and Data Analysis"; NAHQ CPHQ Practice Questions, Patient Safety Metrics.

NEW QUESTION # 214

Evaluating data to determine high utilizers of emergency departments and their related characteristics is a strategy that can best help with

- A. Population health management
- B. Culture of safety
- C. Hospital throughput
- D. High reliability

Answer: A

Explanation:

Identifying high utilizers of emergency departments (ED) and their characteristics involves analyzing data to target interventions for specific patient groups, a hallmark of population health management (PHM).

Option A (Population health management): This is the correct answer. The NAHQ CPHQ study guide states,

"Population health management uses data to identify high utilizers, such as frequent ED users, and their characteristics to design targeted interventions that improve outcomes and reduce costs" (Domain 5). This aligns with strategies like hot-spotting.

Option B (Culture of safety): Safety culture focuses on reporting and error prevention, not ED utilization patterns.

Option C (High reliability): High reliability emphasizes consistent safety processes, not patient utilization analysis.

Option D (Hospital throughput): Throughput focuses on operational flow (e.g., bed turnover), not patient- level utilization patterns.

CPHQ Objective Reference: Domain 5: Population Health and Care Transitions, Objective 5.1, "Use data for population health management," emphasizes identifying high utilizers. The NAHQ study guide notes,

"Analyzing ED utilization data is a key PHM strategy to target high-risk patients" (Domain 5).

Rationale: High utilizer analysis is a core PHM strategy to improve care and reduce costs, as per CPHQ's population health principles.

Reference: NAHQ CPHQ Study Guide, Domain 5: Population Health and Care Transitions, Objective 5.1.

NEW QUESTION # 215

A new pediatric psychiatric unit will open in one year. The utilization coordinator is responsible for developing the utilization management program. The program's success will depend on which of the following factors?

- A. developing the program and presenting it to the appropriate staff members
- B. providing educational in-services to all team members involved
- C. Involving the team members in the development of the program
- D. obtaining approval from the chief psychiatrist at each stage of development

Answer: C

NEW QUESTION # 216

Which type of data could best be used to help identify health-determinant information in a patient population?

- A. event reporting
- B. patient satisfaction
- C. preventive care checklist
- D. payor claims

Answer: D

Explanation:
To identify health-determinant information in a patient population, the best type of data would provide insights into the health conditions, healthcare utilization, and possibly socio-economic factors that influence health outcomes.
Payor claims: This type of data is very comprehensive and includes information about diagnoses, treatments, procedures, and healthcare costs. It can reveal patterns in disease prevalence, treatment outcomes, and access to care, which are all crucial for understanding health determinants.
payor claims data (Option A) is the most suitable as it includes detailed records of healthcare services utilized by patients, which can be analyzed to identify broader health determinants within a patient population, such as chronic condition prevalence, treatment accessibility, and potential socioeconomic barriers to health.

NEW QUESTION # 217

An emergency department's quality improvement report for the first quarter showed the following data:

	January	February	March
Total patients treated	1,000	1,100	1,350
Treated and admitted	100	100	150
Treated and discharged	900	1,000	1,200
Charts reviewed for quality	1,000	1,100	1,350
Misinterpreted x-rays	20	10	8
Problems associated with history and physical	10	6	4
Problems associated with treatment	4	4	19

What was the approximate overall problem rate for March?

- A. 15%
- B. 1%
- C. 2%
- D. 18%

Answer: C

Explanation:
To find the problem rate, divide the total number of problems by the total number of patients treated in March:
* Total problems in March: $8+4+19=31$
* Total patients treated in March: $1,350$
* Problem rate: $(31/1,350)\times100=2.3\%$, approximately 2%.
References:CPHQ materials emphasize calculating problem rates as a standard method for quality analysis.

NEW QUESTION # 218
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