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NAHQ Certified Professional in Healthcare Quality Examination Sample Questions (Q513-Q518):

NEW QUESTION #513

Which team role is responsible for maintaining improvements after the implementation of a quality initiative?

- A. Champion
- B. Sponsor
- C. Process Owner
- D. Facilitator

Answer: C

Explanation:

Detailed Explanation:

The process owner is accountable for the long-term maintenance and sustainment of improvements post-implementation.

Option B: Process Owner

This role ensures continuous oversight and improvement adherence, critical for sustaining changes.

Option A: Champion

Champions advocate and promote the initiative but may not manage ongoing maintenance.

Options C and D:

Sponsors provide support, and facilitators assist in the project's implementation but do not hold responsibility for sustainment. References:

Process ownership is emphasized in quality management literature, where continuous oversight is necessary for successful and sustainable improvements.

NEW QUESTION #514

Which of the following is the best tool to report process improvements to a quality committee?

- A. Histogram
- B. Control Chart
- C. Flow Chart
- D. Scatterplot

Answer: B

Explanation:

Detailed Explanation:

A control chart is ideal for reporting process improvements over time, as it demonstrates both stability and variations in a process. Option D: Control Chart

Control charts visually display changes in a process post-intervention, making them ideal for reporting ongoing performance to quality committees.

Options A, B, and C:

Histograms and scatterplots show data distribution but not process control, while flowcharts illustrate process steps rather than improvements.

References:

Control charts are recommended in quality management for tracking and reporting process improvements, as noted in CPHQ materials and healthcare quality tools.

NEW QUESTION #515

Which of the following is the most proactive approach to quality improvement?

- A. fishbone diagram
- B. root cause analysis (RCA)

- C. failure mode and effects analysis (FMEA)
- D. Plan-Do-Study-Act

Answer: C

Explanation:

Explanation: FMEA (C) is the most proactive quality improvement approach, identifying potential failures before they occur. PDSA (A) tests improvements, while fishbone diagrams (B) and RCA (D) are reactive.

NAHQ emphasizes FMEA for proactive risk management

NAHQ CPHQ Study Guide, Performance and Process Improvement Section, "Proactive Quality Improvement Tools"; NAHQ CPHQ Practice Exam, Risk Management Strategies.

NEW QUESTION #516

Data for an organization's annual Influenza vaccine administration yields the following results:

	nt of Vaccine Giver
January Q	71
February	55
March	30
April	18
May	16 com
June AGU	receto.
Julypassass	16.com 16.com
August	144
September	200
October	195
November	114
December	90

What is the median for the organization's annual vaccine count?

- A. 0
- B. 1
- C. 2
- D. 3

Answer: C

Explanation:

The median is the value that's exactly in the middle of a dataset when it is ordered 12. It's a measure of central tendency that separates the lowest 50% from the highest 50% of values 2. The steps for finding themedian differ depending on whether you have an odd or an even number of data points 123.

Based on the data provided in the image, we can calculate the median by arranging the vaccine counts in ascending order and finding the middle value. The counts in ascending order are: 5, 10, 16, 18, 30, 55, 71, 90,

114, 144, 195, and 200. Since there are an even number of data points (12), we take the middle value directly without averaging two middle values. So here it is option B - "55". This is consistent with the principles of median calculation123.

NEW QUESTION #517

A strategy to address social determinants of health would be to

- A. implement a standard questionnaire for pediatric lead screening.
- B. identify high-risk patients with high-cost medications.
- C. launch a community campaign to promote influenza vaccines.
- D. create patient education materials that are culturally competent.

Answer: D

Explanation:

A strategy to address social determinants of health involves creating patient education materials that are culturally competent. Culturally competent materials consider the cultural, linguistic, and literacy needs of the patient population, making the information accessible and relevant. This approach helps to bridge gaps in understanding and engagement, which are often influenced by social determinants such as education, income, and cultural background.

- * Launch a community campaign to promote influenza vaccines (A): While important for public health, this is not directly focused on social determinants of health.
- * Identify high-risk patients with high-cost medications (B): This is more related to cost management and clinical care than addressing social determinants.
- * Implement a standard questionnaire for pediatric lead screening (D): This addresses a specific health issue but does not broadly address social determinants of health.

References

- * NAHQ Body of Knowledge: Addressing Social Determinants of Health in Healthcare
- * NAHQ CPHQ Exam Preparation Materials: Culturally Competent Care and Education

NEW QUESTION # 518

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By evaluating your shortcomings, you can gradually improve without losing anything in the Certified Professional in Healthcare Quality Examination (CPHQ) exam. You can take our customizable CPHQ practice test multiple times, and as a result, you will get better results each time you progress and cover the topics of the real CPHQ test. The software is compatible with Windows so you can run it easily on your computer.

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