

# Certified Professional in Healthcare Quality Examination

1. Which of the following represents a quality management system with criteria that serve as a tool to assess and award best-in-class organizations?

A. Baldrige Performance Excellence Program

B. DNV GL Healthcare

C. American Osteopathic Association (AOA)

D. The Joint Commission

**Answer(s): A**

---

2. A quality professional has been asked to assist with prioritizing quality performance Initiatives In the surgery department. Given the Information In the matrix below, which of the following performance Initiatives should take priority?

A. Reduce unplanned readmissions.

B. Reduce blood transfusion reactions.

C. Reduce urinary tract Infections.

D. Reduce surgical site Infections.

**Answer(s): D**

---

3. The primary purpose of practice guidelines is to

A. decrease malpractice premiums.

B. minimize variations.

C. document outcomes.

D. decrease the length of stay.

**Answer(s): B**

---

4. A team has identified that labeled cutting boards are needed in a kitchen to decrease cross-contamination.

A. Initiate progressive discipline.

B. Conduct a root cause analysis.

C. Increase monitoring.

D. Determine barriers to compliance.

**Answer(s): D**

---

5. Which of the following best describes the purpose of the nominal group technique?

A. eliminates redundant Ideas generated by team members

B. diffuses potential conflict between team members

C. ensures effective communication among team members

D. encourages equal participation from all team members

**Answer(s): D**

---

6. A quality Improvement team has Identified specific changes to Implement for a quality Improvement Initiative. As the next step, the team would like to establish a concrete timeline for implementation. Which of the following is the best tool to use for this step?

A. process map

B. Gantt chart

C. Ishikawa diagram

D. bar graph

**Answer(s): B**

---

7. The design of a piece of equipment contributes to an error. Which of the following types of errors has occurred?

A. Organizational

B. Latent

C. Active

D. Negligent

**Answer(s): B**

---

8. A healthcare quality professional is doing a study in the emergency room. Every other patient admitted to the department is included in the sample. This sampling technique is best described as

A. quota.

B. systematic.

C. cluster.

D. stratified.

**Answer(s): B**

---

9. A hospital is working to decrease the length of stay for inpatients on a surgical unit. Which of the following should be measured to document aspects of the process that are non-value added?

A. number of services provided

B. turnaround time for diagnostic test results

C. delays between steps in the patient care process

D. nursing productivity

**Answer(s): C**

---

10. A healthcare quality professional is facilitating the establishment of a Quality Council for an outpatient surgery center. The following positions have been selected for membership: medical director, CEO, and CFO.

A. human resources director

B. medical records director

C. environmental safety officer

D. nursing director

**Answer(s): D**

---

11. An organization's preventable fall goal is not to exceed greater than 25% of its total falls. Which units below meet this goal?

A. Units 3 and 4

B. Units 1 and 2

C. Units 4 and 5

D. Units 2 and 4

**Answer(s): C**

---

**12.** Which of the following would be the best methodology to reduce referral wait time?

A. Lean

B. Six Sigma

C. Rapid cycle improvement

D. Plan-Do-Study-Act

**Answer(s): A**

---

**13.** The office manager of a primary care office reviewed the performance of the providers and noted that one provider has not been completing depression screenings consistently for patients in the previous month. The manager's next action is to:

A. Discuss the findings in the next staff meeting.

B. Encourage the medical assistants to complete depression screenings.

C. Talk to the doctor privately about the result.

D. Review the previous three to four months' performance of the provider.

**Answer(s): D**

---

**14.** An orthopedic surgery practice has been working on improving patient safety for the last 3 years. The following data table is available:

A. The patient safety culture has remained consistent.

B. Patient safety outcomes have improved.

C. The increase in "time-outs" has reduced patient harm.

D. The safety event rate has remained stable.

**Answer(s): C**

---

15. A nursing unit has collected the following data:

A. Bar Chart

B. Gantt Chart

C. Pareto Chart

D. Run Chart

**Answer(s): A**

---

16. The collection, analysis, and Interpretation of data for planning, Implementing, and evaluating health programs is

A. prevalence.

B. surveillance.

C. Incidence.

D. sampling.

**Answer(s): B**

---

17. An organization is shifting paradigms from top-down leadership to participatory management. The process of moving forward includes the four identified phases below:

A. 1.2,4,3

B. B. 1.3.2.4

C. 3.1,4.2

D. 3.4.1.2

**Answer(s): C**

---

**18.** Integration of a quality culture within an organization is best demonstrated by

A. reduced adverse outcomes, culture of patient safety, and expansion of services.

B. mission and vision statements, high patient census, and governing body involvement

C. physician competence, staff longevity, and high patient satisfaction scores.

D. leadership rounds. Increased staff satisfaction, and positive patient outcomes.

**Answer(s): D**

---

**19.** Which of the following actions best demonstrates that an organization has begun the work necessary to achieve the Malcolm Baldrige award?

A. creating a team to revise operations to conform to the Malcolm Baldrige requirements

B. develop a crosswalk between Malcolm Baldrige and Joint Commission requirements

C. determine effects on Centers for Medicare and Medicaid Services (CMS) Conditions of Participation.

D. reviewing the Malcolm Baldrige standards to determine organization alignment

**Answer(s): D**

---

**20.** Which of the following is an example of collaboration for optimal care transitions?

A. Involving a multidisciplinary team in the patient's daily inpatient care meeting

B. Using a case manager to coordinate post-discharge care needs with patients and families

C. Conducting regular support groups for patients with multiple chronic conditions

D. Discharging patients with printed lists of all of their medications

**Answer(s): B**

---