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PRACTICE QUESTIONS

Certification Board for Professionals in Patient Safety (CBPPS)

SBFGKK8F

Certified Professional in Patient Safety (CPPS)[™] Examination

EDITION

Demo

QUESTIONS

9

FORMAT

Limited Edition PDF

Before you begin

What this is

9 practice questions for Certification Board for Professionals in Patient Safety (CBPPS) SBFGKK8F, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, SBFGKK8F
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

QUESTION 1

SINGLE CHOICE

Which leadership behavior most directly supports the development of a safety culture in a healthcare organization?

- ☐ A Maintaining strict confidentiality around all safety event details
- ☒ B Modeling transparency and encouraging open discussion of errors and near misses
- ☐ C Holding only frontline staff accountable for safety performance
- ☐ D Focusing safety initiatives exclusively on meeting accreditation requirements

ANSWER B

WHY Effective safety leadership models transparency and encourages open discussion of errors and near misses, which is foundational to a learning-oriented safety culture. Concealing event details (A), one-sided accountability (C), and accred-compliance-only focus (D) undermine culture.

QUESTION 2

SINGLE CHOICE

Which risk identification method is proactive and systematically examines a process for potential failure points before an adverse event occurs?

- ☐ A Root Cause Analysis (RCA)
- ☒ B Failure Modes and Effects Analysis (FMEA)
- ☐ C Sentinel event reporting
- ☐ D Mortality and morbidity conference

ANSWER B

WHY Failure Modes and Effects Analysis (FMEA) is a proactive, prospective method that analyzes a process to identify potential failure modes, their effects, and ways to prevent them. RCA (A) and mortality and morbidity conferences (D) are reactive, performed after events, and sentinel event reporting (C) is also reactive.

QUESTION 3

SINGLE CHOICE

A patient safety officer wants to monitor the rate of central line-associated bloodstream infections (CLABSI) over time and compare performance against national benchmarks. Which type of measurement is most appropriate?

- ☒ **A Outcome measure**
- ☐ B Process measure
- ☐ C Balancing measure
- ☐ D Structural measure

ANSWER A

WHY CLABSI rate is an outcome measure because it reflects the result of care provided to patients and can be benchmarked against national standards such as those from the CDC/NHSN. Process measures assess whether specific steps were performed, balancing measures track unintended consequences, and structural measures assess capacity.

QUESTION 4

SINGLE CHOICE

A nurse accidentally administers a medication through the wrong route because two different medications came in prefilled syringes with similar packaging and labeling. Applying human factors principles, what is the most appropriate conclusion?

- ☐ A The nurse should be retrained on medication administration
- ☐ B The nurse was careless and should be disciplined
- ☒ **C The system design (look-alike packaging) created conditions for human error**
- ☐ D Patients should be responsible for verifying their own medications

ANSWER C

WHY Human factors principles emphasize that errors are often induced by system and design features. Look-alike packaging is a known contributor to medication errors, and the appropriate response is to redesign packaging, differentiate products, and apply forcing functions rather than only retraining or blaming the individual.

QUESTION 5

SINGLE CHOICE

After implementing a hand hygiene initiative, an infection preventionist creates a run chart of monthly compliance rates. What does a run chart primarily display?

- ☐ A The statistical significance of change in compliance over time
- ☒ B A visual display of data plotted over time with a median line
- ☐ C The correlation between two variables such as compliance and infection rates
- ☐ D The frequency distribution of compliance observations

ANSWER B

WHY A run chart is a time-ordered display of data with a central tendency line (typically the median) used to detect trends and patterns of non-random variation. It does not show statistical significance (A), correlation (C), or frequency distribution (D).

QUESTION 6

SINGLE CHOICE

The Joint Commission's National Patient Safety Goals (NPSGs) primarily address which area of healthcare?

- ☐ A Provider salary structures
- ☒ B High-risk areas in patient care such as medication safety and infection prevention
- ☐ C Hospital architectural design standards
- ☐ D Medical school admissions criteria

ANSWER B

WHY The Joint Commission's NPSGs focus on high-risk areas in patient care, including but not limited to medication safety, infection prevention, patient identification, and communication among caregivers. They do not address salary structures (A), architecture (C), or admissions criteria (D).

QUESTION 7

SINGLE CHOICE

Standardization of clinical processes, such as using evidence-based checklists and order sets, primarily improves patient safety by:

- ☐ A Eliminating the need for clinical judgment
- ☒ B Reducing variation and the likelihood of errors of omission
- ☐ C Increasing the cost of care delivery
- ☐ D Limiting interdisciplinary collaboration

ANSWER B

WHY Standardization reduces unwarranted variation and helps prevent errors of omission by ensuring consistent application of evidence-based practices. It does not eliminate clinical judgment (A), necessarily increase cost (C), or limit collaboration (D).

QUESTION 8

SINGLE CHOICE

Which strategy best promotes patient and family engagement in patient safety?

- ☐ A Restricting families from clinical areas to reduce distractions
- ☒ B Encouraging patients to ask questions and including them as members of the care team
- ☐ C Limiting disclosure of safety events to legal counsel only
- ☐ D Providing standardized discharge instructions without verbal explanation

ANSWER B

WHY Engaging patients and families as partners, including encouraging them to ask questions and participate in care planning, is a core strategy for improving safety. Restricting families (A), limiting disclosure (C), and providing instructions without dialogue (D) reduce engagement.

QUESTION 9

SINGLE CHOICE

A patient safety program is implementing the principles of a High Reliability Organization (HRO). Which characteristic is most distinctive of organizations that consistently operate in high-risk, high-hazard domains for extended periods without serious accidents?

- ☐ A Centralized decision-making at the executive level
- ☐ B Reliance on rigid standard operating procedures that cannot be modified
- ☒ C Preoccupation with failure and deference to expertise
- ☐ D Strict hierarchical communication channels that limit frontline input

ANSWER C

WHY High Reliability Organizations are characterized by five key principles: preoccupation with failure, reluctance to simplify, sensitivity to operations, commitment to resilience, and deference to expertise. Options A, B, and D describe characteristics opposite to those of HROs, which emphasize distributed decision-making, adaptability, and open communication.