IIHMR UNIVERSITY

Institute of Health Management Research

MBA Hospital and Health Management

Batch-20th (2015-2017)

Hospital Management

Quality Management and Patients' Safety

Term Examination

Time - 2 Hour **MM-70**

Instructions:

- There are THREE Sections – A B and C
- All questions are compulsory.
- Marks of each section are shown separately.

SECTION A (Each Question – 1 mark)

There is only one correct answer. Encircle the Correct Answer

1. **The ACRONYM 'ISO' denotes?**
   a) Indian organization for standard
   b) Internal organization for standard
   c) International organization for standard
   d) None of the above

2. **All of the following are key aspects of quality EXCEPT:**
   a) It depends upon customer perceptions.
   b) It does not change with time.
   c) It considers customers' needs.
   d) It promotes high levels of precision.

Match the principle/focus of quality with the scientist's name:

Q. No.	Name	Focus/Principle	Answer	
3	1.Schwartz	a. Conformity to standards	1	
4	2.Deming	b. Fitness of use	2	
5	3.Juran	c. PDCA	3	
6	4.Crosby	d. Statistical Process Control	4	
7	5.Donabedian	e. Systems Framework	5	

8. **The sequential and continual nature of the continuous improvement process is illustrated by the PDCA cycle. PDCA stands for:**

   a) Plan-do-check-act.
   b) Produce-design-catalogue-assess.
   c) Plan-development-check—align.
   d) Produce-deliver-check-assure

9. **While you estimate the cost of quality, the following items (s) are included:**
   a) Cost of all work to build a product or service that conforms to the requirements
   b) Training programs
   c) Cost of all work resulting from nonconformance to the requirements
   d) Both 1 and 2
   e) Both 1 and 3

10. **If you were comparing two treatment for which it is easy to arrive at evaluations of both their costs and consequences in monetary terms. Which method of economic evaluation would be best for comparing them?**
   a) Cost-minimisation analysis
   b) Cost-effectiveness analysis
   c) Cost-utility analysis.
   d) Cost-benefit.

11. **Extent to which a service achieves its intended outcomes in a real world environment is known as:**
   a) Effeciecy.
   b) Effectiveness.
   c) Efficacy.
   d) Equity.

12. **Total Quality Management (TQM) focuses on**
   a) Employee
   b) Customer
   c) Productivity
   d) All Above

13. **While setting Quality objectives, which of the following should be considered:**
   a) Customer need
   b) Organizational need
   c) Supplier need
   d) Worker need
   e) Profitability

14. **Malcolm Baldrige national quality award is for (MBNQA)**
   a) Total Quality Management
   b) International Standard Organization
   c) Total Productive Maintenance
   d) Total Quality Control

15. **All of the following statements about variation in quality management methods are true EXCEPT:**
   a) Special cause variation is best addressed at the specific source.
   b) Special cause variation is typically random in nature.
   c) Common cause variation is also known as (internal variation).
   d) Common cause variation is inherent to any given process.

16. **The main purpose of Standards in quality improvement is**
   a) To ensure uniformity and reduce variations in inputs and processes.
   b) To measure performance
   c) To benchmark the quality process.
   d) Measuring trends

17. **A measure used to determine, over time, the performance of functions, processes, activities is defines as a/an:**

a) Indicator.
b) Parameter.
c) Standard.
d) Trend.

18. **Which of the following best quality tool (s) to prioritize the quality issue is**

a) Pareto Chart
b) Ishikawa diagram
c) Process Mapping
d) All of the above

19. **Cause & Effect diagram is used to**

a) Identify and organize possible causes of problem
b) Identify possible solution
c) Identify possible causes of problem and their relationship
d) Monitoring the causes

20. **Which one piece of information is the most useful to describe the age of population that is served in a vaccination clinic?**

a) Pie chart
b) Radar chart
c) Bar chart
d) Scatter chart

21. **Which of the following is the most preferred element of the process of developing quality measures for use in the healthcare setting?**

a) Clinical trials.
b) Evidence-based guidelines.
c) Hospital/ physician quality measures.
d) Pay for performance.

22. **Clinical pathways and guidelines in hospitals are primarily used to**

a) Reduce length of stay.
b) Improve patient satisfaction.
c) Identify errors in patient care.
d) Minimize variation in patient care.

23. **Benchmarking is based on identifying which of the following?**

a) Deficiencies.
b) Statistical control.
c) Best practices.
d) Competition.

24. Failure Mode and Effects Analysis (FMEA) is performed

a) as a preventative measure before an incident occurs.
b) to immediately investigate an incident that occurred.
c) if the severity of an incident led to a patient death.
d) when there is a chance of an incident reoccurring.

25. Regarding Meta-analysis, all the following statements are True EXCEPT:

a) It is a statistical procedure that integrates the result of several independent studies that considered to be combinable.
b) It doesn't allow a more objective appraisal of the evidence than traditional narrative reviews.
c) It provides a more precise estimate of a treatment effect.
d) It may be biased due to exclusion of relevant studies or inclusion of inadequate studies.

26. A time sequence chart displaying plotted values of a statistic, including a center line and statistically determined control limits is a:

a) Process flow chart
b) Scatter diagram
c) Run chart
d) Control chart

27. The following best describes an organization's vision statement

a) It defines the structure of the institution.
b) It describes the organization's strategic plan.
c) It reflects the organization's future aspirations.
d) It is used as a marketing strategy.

28. A team approach to assist in problem solving is most useful when

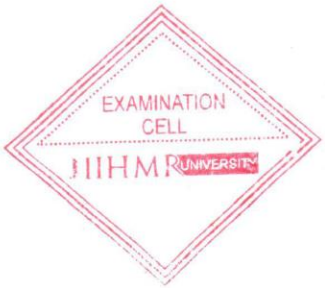
a) Diverse areas of expertise are required.
b) The organization's goals are unclear.
c) Communication challenges exist.
d) There are adequate resources within the organization.

29. Six Sigma performance improvement model

a) Primarily aims to eliminate wrong site surgeries.
b) Allows for no more that 0.3 defects per million opportunities.
c) Introduced and recommended by Joint Commission.
d) It is a performance improvement model.

30. The following are essential functions of an infection control program

a) Risk management and surveillance.
b) Prevention and education.
c) Surveillance, prevention and control of infections
d) Patient safety and risk management.



SECTION B (Each question is 1 mark)

The following 10 (Ten) items consist of TRUE /FALSE type statements;

		TRUE	FALSE
1	Standard Operating Procedures (SOP) are the statement of expectations of inputs, process and outcomes		
2	The major considerations for monitoring quality are defining clear description of NUMERATOR and DENOMINATOR for each indicator.		
3	A letter from the CEO is a good way of dissemination to present and discuss the results of the monitoring system		
4	The main purpose of quality assessment and measurement is to identify the gaps between desired levels of expectations and actual services provided.		
5	Situation Analysis is an approach that looks at service delivery points in a defined geographic area for availability, activities/process for service delivery.		
6	Root cause analysis is done using GANTT Chart		
7	Situational analysis is useful for analyzing the relationship between quality of services and availability of services at the health facility		
8	Mystery Client Studies are used to observe the process of delivery of services		
9	Pareto Principle says that there are many causes of most of the quality problems		
10	Six Sigma approach means that 99.999 percent of processes will be performed in conformity within ± 3 Standard Deviation of the standards		

SECTION C (Each question is 3 marks)

The following **10 (Ten)** items consist of two statements; one labeled as the 'Assertion (A) and the other as 'Reason (R)'. You have to examine these two statements carefully and select the answers to these items using the codes given below. Write the selected code in the blank space below each question.

CODES:

(a) Both A and R are individually true and R is the correct explanation of A.
(b) Both A and R are individually true but R is not the correct explanation of A.
(c) A is true but R is false.
(d) A is false but R is true.
(e) Both A and R are false

1. **Assertion A**: Efficiency and effectiveness both are essential component of healthcare quality.
   Reason R: Increase in effectiveness ultimately increases efficiency.

   Answer _____

2. **Assertion A** : Pareto analysis helps in prioritizing the major quality problems in a healthcare organization
   Reason R : It is based on the high impact of the problem to the healthcare organization.

   Answer _____

3. **Assertion A** : Ratio of effect of program A to effect of program A and B together helps us to calculate effectiveness of program A.
   Reason R : Program effectiveness is needed to understand the degree to which desired results are not achieved.

   Answer _____

4. **Assertion A** : Six Sigma is a methods to reduce the variation in the quality characteristics of input, process and outcome of healthcare services which are critical to the customer.
   Reason R : Higher sigma level essentially means high variations in the quality characteristics of a healthcare product/or services.

   Answer _____

5. **Assertion A** : Swiss cheese model demonstrate that to ensure compliance to standards hospital needs to design the defense mechanism in to its systems
   Reason R : The errors in a system will not occur unless there is gap in most of the defense mechanism at the same time

   Answer _____

6. **Assertion A** : Competency and availability of staff for 24x7 are the key quality attributes of PHC
   Reason R : Good behaviour and good communication skill enhances the competency of doctors at PHC.

   Answer _____

7. **Assertion A** : Open disclosure is about informing patients and their families of bad outcomes of health-care treatment, as distinguished from bad outcomes that are expected from the disease or injury being treated
   Reason R : Open disclosure will help develop trust between the care provider and help identify the individual who is responsible for inducing error to patient so the individual can be punished.

   Answer _____

8. **Assertion A** : Lean Sigma tries to reduce the inefficiency of the system by identifying the non value adding component in a process
   Reason R : Eliminating non value components from a process requires significant investment in high-end technology which in-tern reduces overall cost of care.

   Answer _____

9. **Assertion A :** It is mandatory for a NABH accredited hospital to implement Medical Audit as it helps the hospitals to improve clinical governance.
   Reason R : Medical Audit is a retrospective process of measuring non compliances of clinical process.

   Answer _____

10. **Assertion A :** Any system is perfectly designed to achieve defined level of outcome.
    Reason R : Quality improvement often requires change in structure, process and outcome of a system. But change in not necessary for improvement.

    Answer _____