

IIHMR UNIVERSITY
Institute of Health Management Research

MBA Hospital and Health Management
Batch-21th (2016-2018)
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

Roll Number

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Batch

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Stream

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Date

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Signature of Invigilator: _____

Marks obtained

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Signature of Examiner: _____



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SECTION A

(Each Question – 1 mark)

There is only one correct answer. Encircle the Correct Answer

- 1. 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.
- 2. 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
- 3. 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
- 4. In order to achieve long-term quality improvements, management must do the following:**
 - a) Motivate the employees with seminars, contests, and institution of programs such as "Quality Improvement" day
 - b) Create a quality control department and give the head of the department ultimate responsibility for quality improvement
 - c) Implement a formal quality control program with worker and management involvement



- d) All
- e) None

5. Quality control is:

- a) identifying which quality standards are relevant to the project and determining how to satisfy them
- b) monitoring specific project results to determine if they comply with relevant quality standards and identifying ways to eliminate causes of unsatisfactory performance
- c) evaluating overall project performance on a regular basis to provide confidence that the project will satisfy the relevant quality standards
- d) taking action to increase the effectiveness and efficiency of the project so as to provide added benefits to both the performing organization and the project customer
- e) assuming the production of goods that meet the highest standards of luxury

6. While analyzing harm to the patient, which one of the following statements is not relevant:

- a) Active errors are major causes of harm to the patient
- b) Staff training and motivation are vital for ensuring patient safety
- c) Work pressure affects the performance of the hospital's staff
- d) Human error is the only cause of medication error
- e) All

7. Improved quality would lead to -

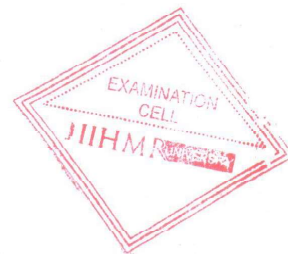
- a) Increased utilization of services
- b) Better health outcomes
- c) Both
- d) None

8. The process of evaluating overall project performance on a regular basis to provide confidence that the project will satisfy the relevant quality standards is called:

- a) Quality Assurance
- b) Quality Control
- c) Quality Planning
- d) Quality Review

9. Tools and techniques used during the Quality planning process includes:

- a) Benefit / cost analysis
- b) Benchmarking
- c) Quality audits
- d) Both 1 and 2
- e) all of the above



10. According to current quality management thinking, which of the following approaches to quality improvement is least likely to produce positive results?

- a) increased inspection
- b) continuous improvement
- c) quality circles
- d) statistical quality control
- e) use of worker suggestion systems

11. The concept that states: "the optimal quality level is reached at the point where the incremental revenue from product improvement equals the incremental cost to secure it" comes from:

- a) quality control analysis
- b) marginal analysis
- c) standard quality analysis
- d) conformance analysis
- e) systems analysis

12. Lean Sigma is a quality improvement method that?

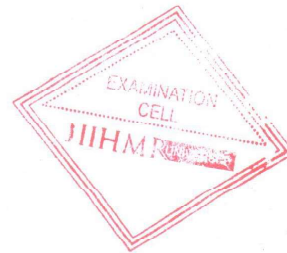
- a. Promotes waste reduction in a process
- b. Follows PDCA cycle of quality improvement
- c. Uses PDCA cycle to remove waste and improve customer satisfaction
- d. All above
- e. Both 1 and 3

13. Which of the following statements regarding quality is false?

- a) Quality improvements depends upon better definition and increased awareness of the requirements specifications
- b) Future gains in quality will often rely on advanced technology
- c) Recognition of key actions required of each team member is necessary to meet quality objectives
- d) Computer-aided design systems can improve quality, but only at the expense of an increase in the cost of design
- e) 1 and 3

14. Which of the following statements best characterizes the quality management practice called benchmarking?

- a) The ISO term for progress measurement
- b) Comparing planned project practices to those of other projects
- c) A technique used to test certain types of electronic equipment
- d) The difference between grade and quality
- e) The measurement of customer satisfaction



15. Quality assurance is defined as the managerial process that determines _____ that provide the customers with performance standards and feedback on the performance.

- a) time, scope, cost, and resources
- b) human resources, dollars, materials, and duration
- c) time, location, duration, and completion
- d) organization, design, objectives, and resources
- e) management, staff, workers, and contractors

16. 'standards' is an authoritative statement of:

- a) minimum levels of acceptable performance
- b) excellent levels of performance
- c) range of acceptable performance
- d) All of the above
- e) None of the above

17. An effort to operationalize quality with respect to expectations of the organization for:

- a) Structure and inputs (supplies, equipment, staff, drugs, etc.)
- b) Service delivery processes and procedures, and
- c) Desired outcomes.
- d) All of the above

18. Limitations of Mystery Client Studies

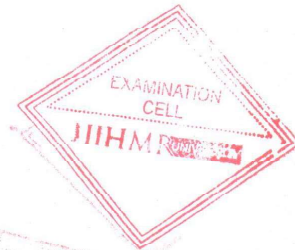
- a) Problems of recall for the details
- b) Client is unable to correctly judge technical competence
- c) Bias of client's views
- d) all
- e) none

19. Role of Team Builder/Team Leader is to

- a) Establish clear aims through helping team members bogged down with methods to come out of it, so that team knows where to go.
- b) Start modestly the process, realising that big oaks also grow from little acorn. Success builds confidence and further success.
- c) Manage the change process quality improvement slowly in the initial phase and then let it become a habit.
- d) Set incremental standards to achieve and improve quality.
- e) Communicate quality concepts that team members can grasp.

20. Which one is not true for Team Building?

- a) People cannot be forced into changes.
- b) People cannot be forced into pretending to change.
- c) People can be forced into openness and honesty.
- d) Remember team building can precipitate others problems, since others group often start feeling insecure.
- e) all



21. The success of a team is dependent on its team members. It is needed that:

- a) All team members are clear about the objectives of the team.
- b) Individual skills are identified and roles clarified.
- c) The team is structured appropriately for the needs of the task.
- d) The team members reflect on their work methods, and set goals for improvement.
- e) all

22. Which among the following is not a part of implementing Quality Assurance in Health care Organizations?

- a) Develop standards and implement them
- b) Compare inputs, process and outcomes standards with the existing situation/actual
- c) Measure gaps and define the problems
- d) Prioritize the problems, collect data to analyze the problems using various QI tools
- e) all

23. An effective monitoring system should meet the following criteria:

- a) Data are used to identify the presence and causes of performance problems
- b) Data are collected regularly to monitor the trend of indicators over time
- c) Data are used to guide management decisions
- d) Data collection is a routine activity integrated into daily tasks
- e) All of the above

24. Major steps involved in establishing a quality monitoring system:

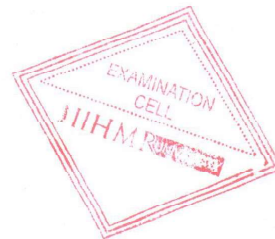
- a) Identification of type of information needed
- b) Data collection, analysis and interpretation
- c) Dissemination and use of information in planning, decision making and action
- d) All of above
- e) None of above

25. Quality assurance process is a

- a) Cyclic process
- b) Static process
- c) Ever improving process
- d) All
- e) Options 1 and 3

26. The best tools to prioritize the quality issue is?

- a. Pareto
- b. Ishikawa diagram
- c. Process Mapping
- d. Both 1 and 2
- e. all of the above



27. A tool that analyzes the Input to a process to identify the causes of errors is called:

- a. Cause and effect diagram
- b. Scatter diagram
- c. Ishikawa diagram
- d. Pareto diagram
- e. Both 1 and 3

28. Which one of the following is not related to the science of improvement?

- a. Appreciation of a system
- b. Understanding of variation
- c. Theory of knowledge
- d. Psychology
- e. All

29. Which among the following is the main approach to quality assessment?

- a) Situation Analysis
- b) Mystery Client Studies
- c) Client Satisfaction Studies
- d) Patient Flow Studies
- e) Focus Group Discussion

30. Cause & Effect diagram is used to

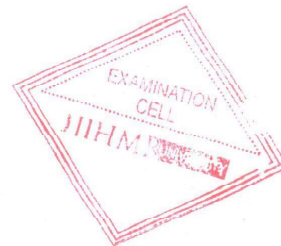
- a) Identify and organize possible causes of problem
- b) Identify possible solution
- c) Identify possible causes of problem and their relationship
- d) Monitoring the causes

SECTION B

(Each question is 1 mark)

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

		TRUE	FALS E
1	The main purpose of quality assessment and measurement is to identify the gaps between desired levels of expectations and actual services provided.		
2	Identifying "means of change/improvement" is the first stage of a PDCA cycle		
3	Standard Operating Procedures (SOP) are the statement of expectations of inputs, process and outcomes		
4	The major considerations for monitoring quality are defining clear description of NUMERATOR and DENOMINATOR for each indicator.		
5	A letter from the CEO is a good way of dissemination to present and discuss the results of the monitoring system		
6	The main purpose of quality assessment and measurement is to identify the gaps between desired levels of expectations and actual services provided.		
7	Situation Analysis is an approach that looks at service delivery points in a		



	defined geographic area for availability, activities/process for service delivery.		
8	Situational analysis is useful for analyzing the relationship between quality of services and availability of services at the health facility		
9	Mystery Client Studies are used to observe the process of delivery of services		
10	Pareto Principle says that there are many causes of most of the quality problems		

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 optimality both are essential component of healthcare quality.
Reason R : Increase in optimality 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.

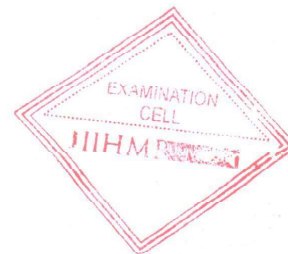
Reason R : Program effectiveness is needed to understand the degree to which desired results are not achieved.

Answer _____

4. **Assertion A** : Lean Sigma is a methods to reduce the 'Muda's in health care 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 all/or most of the defense mechanism at the same time.

Answer _____

6. **Assertion A** : Cost of quality is sum of improving quality and sum of poor quality

Reason R : Increase in improving quality will always reduce the cost of poor quality.

Answer _____

7. **Assertion A** : Managing customer perception is an important aspect of health care

Reason R : Improving customer satisfaction requires an honest promises being made with them and having emotional relations with customer.

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-turn reduces overall cost of care.

Answer _____

9. **Assertion A** : NABH accreditation aims at improving quality of care among accredited hospitals.

Reason R : NABH Accreditation means that a hospital has achieved all the requirements of NABH standards and system to improves the patient safety and total quality management is in place.

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 _____

