



Model Answer of Quality in Health Care Exam

Department: Nursing Administration **Academic Year:** Firs term (2021-2022) **Name:** Quality in health care diploma exam **Code**: DNA503Q **Date:** 24\1\2022 **Time:** 2hrs **Total Marks:** 120

I- Essay questions

(Marks)

Discuss role of nurse in quality of health care services. (15 degree) •

The nurse's role in health care services

1-Care Giver

As a care giver, the nurse helps client to regain health through healing process.

2-Ethical Decision Maker

The nurse uses critical thinking skills throughout the nursing process to provide effective care.

3-Clinical Advocate

Protector & advocate • A nurse provides a safe conducive environment to the client. •

4-Manager

• As a manager, nurse coordinates the activities of other health team members.

nurse manages the nursing care of not only one client but also of families & in communities.

5-Rehabilitator

Rehabilitation is a process by which individuals return to maximal levels of functioning after illness, accidents or other health events. •

6-Comfortor

The role of a comforter is a traditional & historical one in nursing & has continued to be important as a nurse have assumed new roles

7-Communicator



Nursing involves communication with clients & families, other nurses, health care team members, resource persons & the community

As a communicator, nurse provides information to other team members about the palled & unplanned nursing care. •

8-Teather

Teaching refers to the activities by which the teacher helps the learner to learn a teacher. • She determines that the client has fully understood.

9- Leader

As a leader, she influences the client to make decisions regarding health.

10-Counsellor

Nurse helps the client to recognize & cope with stressful, psychological or social problems. • She assists the clients for developing good inter personal relationship

11-Resercher

Nurse investigates problems in order to improve nursing care & expand the scope of nursing practice. • She does many qualitative & quantitative researches.

b. List principles and process of quality assurance. (10 degree)

- Principles of quality assurance

Customer focus •

Leadership •

Involvement of people •

Process approach •

System approach to management •

Continual improvement •

Factual approach to decision making •

Mutually beneficial supplier relationship •



Quality assurance process:

Establishment of standards or criteria •

Identify the information relevant to criteria •

Determine ways to collect information •

Collect and analyze the information •

Compare collected information with established • criteria

Make a judgment about quality •

Provide information and if necessary, take corrective • action regarding findings of appropriate sources

c. Identify advantages and disadvantages of nursing audit. (10 degree)

Advantages of Nursing Audit

Can be used as a method of measurement in all areas of nursing.

Scoring system is fairly simple,

Results easily understood,

Assesses the work of all those involved in recording care,

May be a useful tool as part of a quality assurance program in areas where accurate records of care are kept.

Disadvantages of the Nursing Audit

Appraises the outcomes of the nursing process, so it is not so useful in areas where the nursing process has not been implemented,

Many of the components overlap making analysis difficult,

Is time consuming,

Requires a team of trained auditors,

Deals with a large amount of information,

Only evaluates record keeping. It only serves to improve documentation, not nursing care



2- Multiple Choice Questions: (10 Marks) **Choose only one correct answer:** Pre-requisites for nursing audit include: • Structure audit • Outcome audit • Audit committee • Process audit • Type of nursing audit that refers to control technique performed by an external auditor is: **Internal audit** • External audit • Peer review audit • Concurrent audit • Domain of quality care that provides services based on scientific knowledge to all patients benefit is: Efficient • **Effective** • Equitable • Patient-centered • 4-Is all activities undertaken to predate and prevent poor quality: **Quality assurance** Quality control

5-The objective of quality assurance include to:

Quality improvement

Quality audit



Stimulant to better records •

Ensure the delivery of quality client care

Contributes to research •

Significance of communication •

2- Enumerate importance of strategic planning? (10 marks)

- 1. Motivating staff and volunteers
- 2. Building a planning team with a common vision.
- 3. Confronting key issues and solving problems.
- 4. Defining roles and responsibilities.

It provides accountability and monitoring of performance

- 5. It helps in setting more formal planning programmed and require department and unit planning
- 6. By integrating strategic planning with operational and financial plan
- 7. To improve knowledge and skill in strategic issue
- 8. To improve the communication of top nursing managers with the organization administrator.
- 9. To be more realistic and rational.
- 10. To focus on quality outputs that will improve nurse performance and productivity .
- 3-List steps in the strategic planning process, explain only SWOT analysis? (10 marks)
- STEP 1: Analyze the shared values and experiences of staff and board. Plan a meeting or workshop to facilitate strategic planning.
- STEP 2: Review and update or prepare a Mission Statement for the organization.



Mission – the stated purpose for the organization's existence; the contribution it promises to make to help accomplish the organization and

community vision.

• STEP 3: Analyze the organization's external environment ("PEST" - political, economic, social, and technological factors) and internal environment (resources or inputs, processes, and performance or outputs).

Environmental scan Review organization's strengths and weaknesses.

Reflect on the community and broader environment in which the organization operates to identify the opportunities and threats that it faces.

• Step 4: Conduct a SWOT analysis (assessing the organization's internal strengths and weaknesses, and its external opportunities and threats).

SWOT stands for strengths, weaknesses, opportunities, and threats

By definition, Strengths (S) and Weaknesses (W) are considered to be internal factors over which the organization has some measure of control,

while Opportunities (0) and Threats (T) are considered to be external factors over which it essentially has no control.

Strengths:

- What advantages does organization have?
- What do you do better than anyone else?

Weaknesses:

• What could you improve?



What should you avoid?

Opportunities:

- What good opportunities can you spot?
- What interesting trends are you aware of?

Useful opportunities can come from such things as:

 Changes in technology and markets on both a broad and narrow scale.

Threats:

- What obstacles do you face?
- What are your competitors doing?
- Could any of your weaknesses seriously threaten your business?
- STEP 5: Create smaller groups for more in-depth planning activities in key areas.

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• STEP 6: Review the organization's existing strategic plan (if there is one)

to identify aspects of the plan that are still strategic, those that are no longer strategic due to changing environments, and gaps or new issues that

should be addressed in a revised plan.

• STEP 7: Outline a vision of where the organization should be three to five years from today (the "vision of success").

The vision - an image of what it would be like if the values were shared and practiced by everyone.

- STEP 8: Identify the strategic issues facing the organization.
- STEP 9: Formulate goals and strategic objectives to address major issues



facing the organization and ensure its longer term growth and sustainability.

 STEP 10: Develop work plans showing specific activities, persons responsible, and resources needed, and indicators by which performance

will be measured.

- STEP 11: identify next steps for resource mobilization and create a sustainability and financial plan that costs activities and outlines approaches for generating sufficient revenue or funding.
- STEP 12: Prepare the written detailed five-year strategic plan (mission

statement, environmental or situational analyses, strategic issues, goals and

strategic objectives, activities plans, sustainability and financial plans, monitoring and evaluation procedures or cycles)

STEP 13: Seek ratification and disseminate the plan to staff,
 stakeholders, and potential donors, using this as an opportunity to
 market the organization or to build useful working relationships and

coalitions.

STEP 14: Implement and institutionalize the plan as a basis for setting performance standards, decision making, planning, monitoring, and resource mobilization and allocation. Use and review the plan systematically, updating or revising it after two or three years, if needed.

- . SWOT Analysis
- A SWOT analysis (or SWOT matrix) is a high-level model used at the



beginning of an organization's strategic planning. It is an acronym for "strengths, weaknesses, opportunities, and threats." Strengths and weaknesses

are considered internal factors, and opportunities and threats are considered

external factors.

4-Which factors affecting total quality management? (10 marks)

Attitude of employees toward quality. •

Employees resistance to change. •

High turn over at management level. •

Human resources barrier. •

Inadequate use of empowerment and team work. •

Lack of communication. •

Lack of continous improvement culture. •

Lack of coordination between department

5-Enumerate total quality management outcomes? (10marks)

Strengthened competitive position •

Adaptability to changing or emerging market conditions and to • environmental and other government regulations

Higher productivity •

Enhanced market image •

Elimination of defects and waste •



Reduced costs and better cost management •

Higher profitability •

Improved customer focus and satisfaction •

Increased customer loyalty and retention •

Increased job security •

Improved employee morale •

Enhanced shareholder and stakeholder value •

Improved and innovative processe •

6- Discuss hospital accreditation based on what?

(15 degree)

Principles that underpin quality and Accreditation process. The principles include:

1. Customer focus:-

the organizations should meet and try to exceed the expectations of customers.

2. Leadership:-

Leaders of an organization establish unity of purpose and direction of it. They should go for creation and maintenance of such an internal environment, in which people can become fully involved in achieving the organizations objectives.

3. Involvement of people:-

involvement enables their abilities to be used for the benefit of the organization

4. Process approach:-



The desired result can be achieved when activities and related resources are managed in an organization as process.

5. Continual improvement:-

One of the permanent objectives of an organization should be the continual improvement of its overall performance.

6. Factual approach to decision making

Effective decisions are always based on the data analysis and information.

7. Mutually beneficial supplier relationships:-

Since an organization and its suppliers are interdependent, therefore a mutually beneficial relationship between them increases the ability of both to add value.

National standards for hospital accreditation:

1-stander 1:patient rights and responsibilities, organization ethics

2-stander2:patient access and assessment of patient

3-standard3:providing care ,diagnostic services, blood bank and transfusion services, invasive proced,patient and family education

4-standard 4:medication management

5-standard 5:patient safety, infection control, and environmental safety

6-standard 6:information management

7-standard 7:performance improvement

8-standard 8 :organization management and leadership human resources-nursing services -medical staff



9-standard 9 :community involvement

7-Benefits of accreditation and serves what? (15 degree)

The Benefits of Accreditation

:Accreditation serves the organization by

- provide for self-evaluation and self-directed institutional and Program improvement
 - •Ensure and improve quality of health services
- Demonstrates the organization's commitment to safety and quality.
- It provides opportunity to healthcare unit to benchmark with the best
- Health providers learn in an objective manner how they can improve quality.
- Establishes an accreditation database of information to determine pinpoint problem areas, or highlight opportunities for improvement.
- Ensure affair, valid evaluation process.

Accreditation serves the pt by:

- Improved patient care by providing a staff education tool.
- Receive high quality of care.
- Decrease length of stay.
- Increase pt satisfaction



Accreditation serves the public by:

• An improvement in the professional services available to the public, as accredited programs modify their requirements to reflect changes in knowledge and practice generally accepted in the field.

To students, accreditation provides:

• accredited institution or program have been found to be satisfactory and therefore meet the needs of students.

Process evaluation state during accreditation survey (10 degree)

Accreditation process in Hospital Accreditation

To maintain accreditation, a hospital must undergo an on-site survey by a Joint Commission survey team at least every three years. The objective of the survey is not only to evaluate the hospital, but also to provide education and guidance that will help the staff continue to improve the hospital's performance.

1- The Team

Survey teams usually include three health care professionals--a physician, a nurse and a hospital administrator--who have senior management level experience in health care organizations

All Joint Commission surveyors are extensively trained before they are sent into the field, and all receive continuing education to keep them up-to-date on advances in quality-related performance evaluation.

2- The Survey



During an accreditation survey, surveyors evaluate the level of an organization's compliance to standards and identify the organization's strengths and weaknesses.

The survey team spends several days at the hospital observing activities, interviewing patients and staff, and reviewing documents.

The team spends a significant amount of time on patient units, observing care as it is carried out. The team may track a patient through his or her hospital stay--in person and through medical records--to find out how the hospital's systems and processes work in supporting patient care.

The surveyors do not judge directly whether the care given to a specific patient is good or bad, right or wrong. Rather, they determine:

- What activities are carried out,
- How well they are performed and,
- Where possible, the resulting effects or outcomes for patients of various types.

The surveyors use scoring guidelines to assist them in making judgments about standards compliance in specific performance areas

3- The Evaluation The report lists:-

- The accreditation status
- The date of the survey



- o An evaluation of key areas reviewed during the accreditation survey
- The results of any follow up activity
- o Areas needing improvement

At the end of the survey:

Related standards are grouped into performance areas, each of which is scored. In almost all cases, that score, along with related performance considerations, determines the category of accreditation.

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