

2026 BOG prep Week 1 Quiz -- Governance and Quality and Performance

Email *

1. The governing body of a healthcare institution meets its responsibility for the quality of patient care by: 1 point

Mark only one oval.

- A. Delegating accountability for patient care to the committee appointed by the governing body, which provides a formal administrative liaison between the governing body, the administration, and the medical/professional staff.
- B. Delegating to the chief executive officer the responsibility for developing criteria for making certain that an effective medical/professional audit is carried out.
- C. Establishing, maintaining, and supporting through medical/professional staff and management staff an ongoing program of review and evaluation of patient/client care and action on findings
- D. Establishing an effective system for utilization review, medical/professional audit activities, and credentialing of the medical/professional staff.

2. Before submission of the annual business plan to the governing authority, the plan should be developed by: 1 point

Mark only one oval.

- A. Recommendations from the finance committee, on the basis of its estimate of income for the budget year.
- B. The heads of the profit centers, considering each center's anticipated revenues and expenses, with the CEO collating.
- C. Key executives, after receiving recommendations from the head of operating divisions
- D. The heads of the operating divisions, with the CEO collating.

3. The governing authority assures itself about the quality of care by: 1 point

Mark only one oval.

- A. Holding the CEO of the health facility accountable.
- B. Making the president of the medical/professional staff an ex officio member of the governing authority
- C. Approving the process and then following up regularly and continuously to see that it is being used
- D. Reviewing tabulated results of incidence reports

4. The establishment of an appropriate credentialing procedure for members of the medical/professional staff should ultimately be a decision of the: 1 point

Mark only one oval.

- A. Entire medical/professional staff
- B. Credentialing committee
- C. Governing authority
- D. Medical/professional executive committee

5. CEO compensation should be based on: 1 point

Mark only one oval.

- A. The compensation arrangements with the prior CEO.
- B. Present salary plus cost-of-living adjustment.
- C. Executive compensation in local corporations with similar gross revenues.
- D. What the institution would have to pay for a similarly prepared person if that person were employed elsewhere.

6. In a healthcare organization, who has ultimate fiduciary responsibility? 1 point

Mark only one oval.

- A. Chief Financial officer.
- B. Board of Trustees
- C. Chief Executive Officer
- D. Finance Committee of the Board

7. Mission statements: 1 point

Mark only one oval.

- A. Are frequently changed in response to environmental issues and marketing trends.
- B. Never Change.
- C. Do not require formal board action when revised.
- D. Identify in broad terms the purposes for which an organization exists.

8. The chief executive officer: 1 point

Mark only one oval.

- A. Is a member of the board.
- B. Is not a member of the board.
- C. Represents the board internally and externally.
- D. Has a contract with the board.

9. Regarding the budget, the board:

1 point

Mark only one oval.

- A. Does not use the budget exercise as a way to improve quality and productivity.
- B. Gets involved in preparing budgets for all operational units.
- C. Decides which personnel are needed in top management.
- D. Establishes guidelines and makes final choices among competing opportunities.

10. The individual or group responsible for establishing policy, maintaining quality of care, and providing for institutional management planning is the:

1 point

Mark only one oval.

- A. Chief Medical Officer
- B. Chief Nursing Officer
- C. Hospital Authority
- D. Chief executive officer

11. A correct statement regarding trustees serving as fiduciaries is that they can:

1 point

Mark only one oval.

- A. Be indicted for alleged theft of facility funds and the improper expenditure of facility funds for personal reasons.
- B. Be released from responsibility by giving the audit committee final authority in high-risk areas of financial matters, without any action by the whole board.
- C. Be held personally liable for wrongful acts or omissions by corporate officers or co-trustees by virtue of their position as trustees.
- D. Waive their fiduciary responsibility as a community organization.

12. A key reason for choosing board members is because:

1 point

Mark only one oval.

- A. They have high status in the community.
- B. Of what they can do for the organization.
- C. Other board members want to listen to their opinions.
- D. Physicians will listen to them.

13. The administrator's relationship with the board of directors should be one in which the administrator:

1 point

Mark only one oval.

- A. Minimizes board involvement in any operational issues.
- B. Serves as the functionary for implementing all board of directors' decisions.
- C. Draws upon skills of board members in facilitating appropriate discussion and decision making.
- D. Identifies those topics with which the board should involve itself.

14. Which of the following bodies has the final accountability for the formulation of policies and procedures concerning professional responsibilities within the healthcare organization? 1 point

Mark only one oval.

- A. Chief executive and senior management.
- B. Medical executive committee.
- C. Governing authority.
- D. Quality assurance committee.

15. Which of the following is a key responsibility of a governing board? 1 point

Mark only one oval.

- A. Recruit and select the CEO.
- B. Operationalize the organization's strategic plan.
- C. Assist the CEO with evaluation of the rest of the management team.
- D. Develop a physician recruitment plan.

16. The main role of the board is: 1 point

Mark only one oval.

- A. Selecting the CEO
- B. Overseeing operations
- C. Setting institutional policy
- D. Running the institution in the absence of the CEO

17. Governing boards are typically more effective at what size? 1 point

Mark only one oval.

- A. 10 to 15 members.
- B. 15 to 25 members.
- C. 5 to 10 members.
- D. More than 25 members.

18. The primary purpose of the quality assurance/risk management program is to: 1 point

Mark only one oval.

- A. Comply with licensure and accreditation standards as required by state and federal legislation
- B. Monitor medical staff practices in order to control the increases in malpractice rates
- C. Identify potential problems that will keep the hospital from becoming a party to litigation
- D. Monitor, control, and direct the institution's efforts towards achieving delivery of the optimal level of care

19. Current JCAHO guidelines regarding measurement (the collection of data) include all of the following except: 1 point

Mark only one oval.

- A. The data collection processes should be consistent with those of the JCAHO's "10-step method" for quality assessment.
- B. The data should identify opportunities for possible improvement of existing processes
- C. The organization must collect data about the appropriateness of admissions and hospital stays
- D. The organization must collect data on patient care processes that are high risk, high volume, and problem prone.

20. All areas of healthcare facilities are subject to safety, convenience and other regulatory requirements as dictated by the state life safety codes, JCAHO, OSHA, state fire marshal, etc. Which area of the facility typically has the highest standards? 1 point

Mark only one oval.

- A. The energy plant
- B. Highly used public areas
- C. Areas under construction
- D. Patient care areas

21. The principles of quality improvement require that healthcare executives change their philosophy from: 1 point

Mark only one oval.

- A. Finding fault with employees to finding problems in processes.
- B. Finding fault with employees to involving them in the improvement of processes.
- C. Focusing on enhanced inspection techniques to focusing on variance.
- D. Focusing on employees' roles to focusing on process outcomes.

22. Continuous quality improvement assumes that: 1 point

Mark only one oval.

- A. Achievement will be rewarded.
- B. There is direction from top management.
- C. There is no upper limit to excellence.
- D. Interconnected work teams are in place.

23. Performance improvement teams should consist of: 1 point

Mark only one oval.

- A. Experts in process management.
- B. Members from the involved Microsystems.
- C. Middle managers with experience.
- D. Physicians and other users.

24. A bar chart format, with the items rank ordered on a dependent variable, such as cost, profit, or satisfaction that Examines the components of a problem in terms of their contribution to it is known as: 1 point

Mark only one oval.

- A. A run chart.
- B. A frequency table.
- C. Pareto analysis.
- D. Deming cycle.

25. Which is the Shewhart process for performance improvement: 1 point

Mark only one oval.

- Plan, check, do, act.
- Plan, do, check, act.
- Analyze, formulate, implement, evaluate.
- Define, Measure, Analyze, Implement, and Control.

26. Which of the following would be a discrete measure in continuous improvement: 1 point

Mark only one oval.

- A. Gender.
- B. Weight.
- C. Height.
- D. Temperature.

27. In a hospital setting, a critical pathway is best described as: 1 point

Mark only one oval.

- A. A document that focuses on efficiency and describes a standard set of activities to be performed for a defined category of patients.
- B. A set of guidelines that focus on identifying those decision points which should lead to the consistent provision of appropriate clinical practice.
- C. Any attempt to standardize clinical activities based upon diagnostic categories and projected outcomes.
- D. Decision tree that focuses on physician decision making.

28. The arrival of women for obstetrical deliveries or patient flow in an emergency department can best be analyzed through the use of which technique? 1 point

Mark only one oval.

- A. Pert Charting
- B. Gant Charting.
- C. Stochastic Modeling.
- D. Monte Carlo Simulation.

29. One approach for measuring technical quality of clinical support services is: 1 point

Mark only one oval.

- A. Patient satisfaction scores.
- B. Degree of continuity of care.
- C. Appropriateness testing.
- D. Process review.

30. The applicability of continuous improvement in healthcare organizations assumes: 1 point

Mark only one oval.

- A. An upper limit of improvement.
- B. The physician's perspective is dominant.
- C. An organizational commitment.
- D. The elimination of outliers.

31. In consultation with the board, the administrator has decided that an effort must be made to increase the level of involvement among management personnel in quality assessment and assurance. Which one of the following options is most likely to achieve the desired results? 1 point

Mark only one oval.

- A. Send all key management personnel to quality assessment workshops over the next year
- B. Delegate quality assessment function in question to the medical records committee
- C. Delegate quality assessment education functions to the utilization review coordinator
- D. Develop an in-house program using trained key personnel for presenting and discussing assurance and its implication for the organization.

32. Current JCAHO guidelines regarding the design of new patient care processes include all of the following except: 1 point

Mark only one oval.

- A. The design is clinically up-to-date
 - B. The design is based on the organization's mission, vision, values, and plans.
 - C. The design meets the needs and expectations of key constituents
 - D. The design team includes physicians or their designees
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