

ACHE of Georgia BOG Exam Prep 2026

Week 1 Quiz & Answer Key

Quality and Performance

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

- 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

- Correct answer is D
- The primary purpose of a quality assurance program is the delivery of the optimal level of care. The other responses are secondary to the purpose of having a QA program. Remember that in a healthcare facility, patient care comes first.

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

- 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.

- Correct answer is A

The Joint Commission (TJC), formerly known as the Joint Commission on Accreditation of Healthcare Organizations (JCAHO)

It is an **independent, not-for-profit organization.**

The JCAHO stipulates that data collection should be designed so that the needs of patients are measured on an ongoing basis. Data should identify improvement opportunities.

Source: JCAHO. Pp PI-15-19, Standards, PI.3 – PI.3.2.4

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?

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

- Correct answer is D

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

- 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.

- Correct answer is A

22. Continuous quality improvement assumes that:

- 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.

- Correct answer is C

23. Performance improvement teams should consist of:

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

- Correct answer is B

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:

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

- Correct answer is C

25. Which is the Shewhart process for performance improvement:

- A. Plan, check, do, act.
- B. Plan, do, check, act.
- C. Analyze, formulate, implement, evaluate.
- D. Analyze, implement, control, evaluate.

- Correct answer is B

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

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

- Correct answer is A

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

- 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.

- Correct answer is A

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?

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

- Correct answer is C

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

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

- Correct answer is D

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

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

- Correct answer is C

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?
- 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.

- Correct answer is D

The key word is develop. Answers B and C can be immediately disqualified because results are less likely to be achieved through delegation.

Answer D is the most inclusive and proactive answer.

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

- Correct answer is D

New patient care processes must include up-to-date information regarding clinical practices and must be compatible with the organization's mission, vision, and plans. The needs of patients, staff, and all others who are affected must also be taken into account.

Source: JCAHO. *Comprehensive Accreditation Manual for Hospitals*.
p. PI-13., Standard PI.2.