IIHMR DELHI | INTERNATIONAL INSTITUTE OF HEALTH MANAGEMENT RESEARCH

Post Graduate Diploma in Management (Hospital & Health Management)

PGDM – 2024-2026 Batch

2nd Year – 4th Semester End Examination

Subject & Code	:	**Hospital Accreditation and Quality Framework (HAQF)-HOM 718**	**Reg. No.:**
Semester & Batch	:	**IV, 2024-2026**	**Date : 02-03-2026**
Time & Duration	:	**10:30 A.M.-01:30 P.M. (3 Hrs.)**	**Max. Marks : 70**

Instructions:

- Budget your time as per the marks given for each question and write your answer accordingly.
- Don't write anything on the Question Paper except writing your Registration No.
- Mobile Phones are not allowed even for computations.

Part A: Q.1 to Q.10 all questions are compulsory (10 X 2 Marks = 20 Marks)
One liner, MCQs, True/False

Q1. Which of the following is a mandatory clinical KPI as per NABH 6th Edition?
A Staff satisfaction index
B. Average Revenue Per Occupied Bed
C. Hospital-acquired infection rate
D. Brand recall score

Q2. NABH 6th Edition mandates monitoring of which of the following patient safety indicators?
A . Market share growth
B. Sentinel events
C. Social media engagement
D. Advertising expenditure

Q3. A hospital experiences an increase in Catheter-Associated Urinary Tract Infection (CAUTI) rates. As per NABH KPI monitoring requirements, the first administrative step should be:
A. Increase bed capacity
B. Conduct root cause analysis and take corrective steps
C. Reduce nursing staff
D. Discontinue monitoring of the indicator

Q4. A hospital has:
• low mortality
• high readmission
• high mean length of stay
Likely, it reflects
A.This hospital has good discharge planning
B.This hospital has poor clinical documentation
C.This hospital lacks continuity of care
D.This hospital has good infection control

Contd…2..

Q5. What is the main focus on the 6th Edition of NABH standards?
A.The profitability of hospitals
B.Patient safety and quality of care
C.Medical tourism
D.Only infrastructure

Q6. Which of the following is a required committee under NABH 6th Edition
A.Advertising Committee
B.Infection Control Committee
C.Branding Committee
D.Revenue Optimisation Committee

Q7. NABH 6th Edition has highlighted patient rights. This relates to which quality principle?
A. Revenue generation
B. Patient centered care
C. Benchmarking
D. Hospital branding

Q8. A 250 bed tertiary care hospital is in compliance with all documentation and has no failures in any audit. But has not any monitoring of outcomes. Hospital should:
A. Increase file audit.
B. Move from structure compliance to outcome measurement and quality indicators.
C. Just upgrade infrastructure.
D. Decrease internal audit.

Q9. Joint Commission International (JCI) accreditation is primarily known as:
A. Local body accreditation
B. International accreditation for patient safety
C. Finance audit accreditation
D. Biomedical licensing

Q10. While accreditation, a hospital has found gaps in infection control practices. What should be done first?
A. Conceal non-compliance areas.
B. Gap analysis and corrective plan.
C. Delay the assessment.
D. Change hospital logo

Part B: Q.11 to Q.15 attempt any four questions (4 X 5 Marks = 20 Marks) - Short Notes

Q11.What is your understanding of Accreditation? Briefly explain the purpose and structure of NABH.

Q12. Accreditation, Licensing, and Certification: Differences. Explain with examples

Q13. A 200-bed hospital has a high incidence of surgical site infections (SSI). Explain how the standards of accreditation can be utilized to address this problem.

Q14. Explain the structure and elements of the standards of National Accreditation Board for Hospitals & Healthcare Providers.

Q15. List the domains of Joint Commission International Accreditation.

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Part C: Q.16 to Q.19 attempt any three questions (3 X 10 Marks = 30 Marks) - Long Notes

Q16. Case Study: Accreditation Crisis at Sunrise Multispecialty Hospital

Sunrise Multispecialty Hospital is a 220-bed tertiary care hospital in North India. The hospital recently underwent a pre-assessment audit for accreditation from the National Accreditation Board for Hospitals & Healthcare Providers.

The audit identified the following gaps:

- Unorganized documentation of medication administration records
- Absence of an organized incident reporting system
- Highest surgical site infection (SSI) rates above national averages
- Lack of formal Root Cause Analysis performed for sentinel events
- Lack of knowledge among staff regarding International Patient Safety Goals (IPSG)
- Quality indicators not reviewed at the leadership level
- Absence of an organized internal audit process

The Board of Directors has appointed you as the new Quality Head and has given you 12 months to prepare the hospital for full accreditation.

Q1. Identify and describe how you would use accreditation standards to address any three major gaps identified in the audit report

Q2. Analyze the root systemic causes for the hospital's poor readiness for accreditation.

Q3. Assess the possible risks to patient safety, legal viability, and hospital reputation if these gaps are not addressed prior to the accreditation process.

Q17. Examine the structure of NABH standards and describe how various chapters (such as Access, Assessment & Continuity of Care; Care of Patients; Continuous Quality Improvement; Facility Management & Safety; Human Resource Management) are interwoven to form an integrated quality system in hospitals. Describe how fragmentation in one domain can impact overall accreditation compliance

Q18. A 250-bed tertiary care hospital is gearing up for its first accreditation by NABH.

Analyze the organizational gaps that are found in most of the pre-assessment audits, including:

- Documentation gaps
- Committee management
- Monitoring of quality indicators
- Infection control programs
- Staff competency evaluation

Justify the systemic causes for such gaps.

Q19. Assess the strategic advantages and disadvantages of NABH accreditation for hospitals in India.

Consider the following:

- Patient safety
- Legal safeguards and risk mitigation
- Cost implications
- Competitive advantage
- Return on investment

Determine if NABH accreditation adds value to the organization.