

International Board for Quality in Healthcare IBQH

Examination Handbook



STEP UP
TO
QUALITY

2010

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Before you register for IBQH exam, you should read carefully our handbook and frequently asked questions FAQ, if you have questions, you should contact us

Introduction to the IBQH Program:

The International Board for Quality in Healthcare IBQH program is designed to assist healthcare professionals to improve quality in healthcare services; it is a professional certification that tests basic quality knowledge in healthcare.

The IBQH program targets all candidates of all educational levels who work in the field of Healthcare. It aims to provide the basic knowledge and skills of quality to the candidate.

IBQH as well provides terms for recertification which are necessary for updating and ensuring the quality of healthcare services delivered to the patients is Up-to-date.

Mission statement:

IBQH is directed to ensure that every healthcare employee is capable of delivering healthcare services of higher quality by providing the needed basic knowledge of quality.

Vision statement:

IBQH is designed to improve skills and increase number of high quality professionals providing healthcare worldwide.

Affiliation and Accreditation:

The International Board for Quality in Healthcare IBQH is accredited from The Learning Machine Ltd (TLM). TLM is an Awarding Body Accredited by **Ofqual CCEA** and **DELLS**, the regulators for qualifications in England Wales and Northern Ireland. TLM is endorsed by eskills.

Ofqual refers to the Office of Qualifications and Examinations Regulation, is a government organization which regulates the exams, qualifications and assessments in England. This organization also covers regulations on vocational testing in Northern Ireland.

The assessment details are based on the new UK Qualifications and Credit Framework (QCF) that is referenced to the European Qualifications Framework (EQF). It has the flexibility to link to nationally accredited frameworks, for example, the National Curriculum and GCSE in the UK and more generally other national frameworks especially those referenced to the EQF.

The IBQH is sponsored by African Society for Quality in Healthcare ASQH

Statement of nondiscrimination:

IBQH is offered to anyone regardless of the age, gender, race, religion, national origin or disability.

Fees:

Examination fees are 200 \$ Fees can be paid by credit card payment.

Recertification fees are 150 \$ Fees can be paid by credit card payment.

Test center locations:

We have more than 5000 test center worldwide; to locate a test center where you can take the exam, please visit this webpage www.pearsonvue.com/IBQH/locate/.

Eligibility criteria:

The examination committee develops the IBQH examination questions to test fundamental knowledge and skills needed for professionals in healthcare quality.

There is no specific education or prior experience needed for applying for the IBQH examination. All candidates will have equal chances to excel at their examination process.

IBQH examination is capable of identifying competent candidates among all those who take the examination.

IBQH does not test candidates at entry level so candidates with minimum requirements of education and experience especially if they have not worked in the field of healthcare quality management or candidates who have less than 2 years of experience or no experience in the field are highly recommended to take their time reviewing all information in the IBQH handbook.

The sample questions, the reference list, the tasks that have to be covered in the IBQH handbook and any data or necessary tools are needed to assess readiness before attempting the IBQH examination.

IBQH certification**Certification:**

Each candidate has to pass the IBQH examination which is available in a computer based format at the test centers. Candidates who pass the exam will receive a certificate, an IBQH pin and an identification card; also, they will be entitled to use the designation “IBQH” after their names, e.g.: Dr. Peter Smith MD, IBQH

Certification is valid for 2 years starting from the day that the candidates passes the examination. All information on recertification will be available on the official website.

Candidates who fail to pass the examination should submit a new application with new fees.

Objectives of certification:

- Improving healthcare quality management.
- Recognition of professionals succeeding the examination process and acquiring the required knowledge and skills in the field of healthcare quality management.
- Identification of individuals with distinguished knowledge and skills in the field of healthcare quality.
- Continuous improvement of competence of IBQH candidates through recertification while maintaining professional standards as well.

Recertification:

After successfully passing the IBQH examination, a recertification handbook will be handed over with the start of each recertification cycle for instructions and information on the recertification process.

Recertification requires obtaining and maintaining documentation of 36 credit hours over the 2 year eligibility period as well as the recertification fees. Continuous education should cover the most current areas in the examination content outline. The employment in quality management is not a necessary item for maintaining an active IBQH status. Continuous education requirements for recertification will be continuously reviewed by ASQH.

IBQH Examination:

The IBQH certification exam is a multiple choice question MCQ that consists of 150 MCQs (130 marked MCQs & 20 unmarked MCQs).

MCQs are precisely designed to test different capabilities of the candidate; 27% of questions will test the ability to recall specific facts and basic concepts in quality, 46% of questions will test the ability to interpret information and put them into use for applying the basis of quality management in practice and 27% of questions will test the ability to assess problems, integrate information, solve these problems and apply solutions for implementing the concept of quality in the health care services. The content of the exam is current, related to practice and represent forms of tasks that have to be carried out by quality managers in any part of the world.

Before examination

Examinations services:

International candidates applying for the certification program should follow the steps in www.IBQH.org .

The candidate will be required to show 2 forms of identification in order to undertake the exam:

- The ID form used in registration stage and it should include a photo.
- An ID form with a recent personal photo.
- Both IDs should have signatures.

Results will be delivered to candidates within 21 business days.

Preparation for the IBQH certification exam:

The ASQH does not sponsor, endorse or benefit from any review courses or published materials for the IBQH certification examination.

Examination questions are derived from a wide variety of publications and resources in the field of quality. Some suggested books here <http://www.ibqh.org/step2>

Examinations will be administered only by scheduling an appointment according to location of test center, No examinations to be scheduled on national holidays.

Rescheduling for examination:

Rescheduling of examinations is possible up to 48 hours before booked appointment times. For rescheduling an examination appointment, simply go to www.pearsonvue.com/IBQH/ and sign into 'My Account'. After you sign in, you can schedule/change your exam appointments, view your testing history and view/modify your personal information.

The Pearson VUE secure website encrypts your personal information so that it cannot be read by unauthorized Internet users.

During examination

Examination day:

Prior to examination day, all candidates will receive a confirmation email of exam appointments, so candidates should arrive on time at their set appointment for examination, and they should present themselves at the test center with their IDs and confirmation email. Candidates will be asked to show two forms of Identification (as mentioned above) and will be asked to sign a digital signature pad.

Candidates who arrive more than 15 minutes late for their appointment may not be admitted and will have to re-book and pay for examination again.

Essential candidate identification:

Candidates will need to gain admission at the test centers prior to examination. This is carried out through legal identification of the candidates using either of the following: identification card, driver license, military identification card or passport.

Other forms of identification are cards that show name and signature however can't be used for legal identification such as club membership card, student identification card or employment card. They are considered a second form of identification.

All identification forms should be current, temporary identification forms will not be accepted and candidates will be asked to sign a roster to verify identification.

Candidates should follow the disciplinary policy and not misrepresent their identity or else will be prohibited from admission.

Tutorial and Navigation:

The examination is a computer based format examination, so the test center will provide 15 minutes for a tutorial prior to any examination it gives and it is not part of the examination time and candidates can finish this session when they are comfortable with the test process and think they are ready to take the examination.

Timed examination:

Instructions before taking the examination will be provided on screen.

Time of exam:

The duration of the exam is 3 hours and a clock will be presented at the top right corner of the screen and will continue to display throughout the exam presenting the time remaining.

After examination

Scoring system:

-Pass/fail score determination:

After examination, no questions are discussed or released. To do so, the question will be omitted from the IBQH question bank which results in a decrease in the number of questions from which more examination versions can be created in the future.

For the fair evaluation of applicants and candidates, the number of questions chosen for each examination version should be matching the distribution requirements of the examination content blue print.

Our experts choose an appropriate scoring method to set the passing score. They determine the number of correct answers that can demonstrate the knowledge and skills for a candidate to pass the examination. By this, the ability of candidate to pass the examination depends on the knowledge and skills he can demonstrate rather than on the performance of other candidates.

Based on the fact that each question has been pretested then the difficulty level for each examination version can be determined using a statistical equating process and thus the passing score can then be adjusted up and down depending on the variant difficulty level for each examination version.

If you pass the examination:

Once a candidate successfully completes the exam and announced “pass”, and allowed to use the certification acronym “IBQH” on all forms of address e.g. business cards ...etc.

An information package will be mailed within 1 month from the end of the month in which the candidate was tested, it includes:

1. IBQH identification card.
2. Success certificate.
3. An IBQH pin.

IBQH mails a congratulatory letter and announces the list of candidates who successfully passed the examination by the end of each year.

IBQH certification is concerned with the certification of each candidate passing the exam.

If you did not pass the examination:

If ever the candidate fails to pass the examination, the candidate has an unlimited number of times to re-apply for the exam.

Names of candidates who apply and fail the test remain confidential no matter what and not revealed except when legally requested.

Scores cancelled by IBQH or test centres:

At any time, if scores were suspicious due to computer malfunction or candidate misconduct, an investigation will be conducted. If it was found out that regulations were violated by the candidate, results will be obscured (voided).

IBQH and the test centers are responsible for overcoming such discrepancies and rectifying them as much as possible.

Duplicate score report:

An extra IBQH pin and a duplicate of the score report can be requested within 90 days by any candidate after taking the examination. A request form includes the name, the national identification number, the mailing address, the date of examination and an authorization signature. The request should be submitted in a written form to info@IBQH.org within 90 days after the examination. Duplicate reports are then mailed within 2 weeks of receiving the request, a duplicate report is charged for 40\$ and Request for an extra pin is charged for 35\$.

Appeals:

Appeals should be submitted in a written form. Appeals should not challenge individual examination questions, answers or failing scores because each question of the examination that has been included in the final score has been pretested.

Appeals are allowed in the following conditions:

- If the board took some actions that affected the eligibility of the candidate for examination.
- If certain environmental conditions were disrupting the examination process in a major way and could not have been avoided
- If the administrative procedures of examination were disrupting the examination process in a major way and could not have been avoided (alleged).

Appeals are received within 30 days of the initial IBQH action.

Appeals for inappropriate administrative procedures or environmental testing conditions are received within 60 days of the release of the examination results.

IBQH chairman will respond in 30 days of receipt of the appeal and if the appeal is adverse, the candidate may file a second level appeal within 30 days, then a 3 board member committee of the IBQH within 45 days of its receipt will look into the chairman's decision and a final decision will be mailed to the candidate.

Verification of IBQH status:

A list of the candidates who successfully pass the IBQH examination will be displayed on the IBQH website and in a program newsletter.

The correct name and national identification number is essential for verifying the certification status of any candidate who has earned the designation of international professional in healthcare quality and information on certification can be made public when ever requested.

Test centers security regulations:

To assure that a same opportunity is provided by the test center for all candidates to demonstrate their abilities, the test centers have set some regulations which should strictly be followed:

-No candidate can take a calculator to test centers, but candidate can use simple calculator which is available through test program.

-If any of those terms were violated, the candidate will be immediately dismissed and prohibited from resuming the examination.

-Test centers are also provided with surveillance cameras to monitor the conduct of candidates, the administrative procedures and the environmental conditions for the examination process.

Before exam**Examination Restrictions:**

- Pen and a scratch paper are provided by the proctor and to be handed over again to the proctor at the end of the examination.
- No questions are to be asked during the examination.
- No attempts of giving or receiving information from other candidates having the examination.
- Pagers, cellular phones, cameras, recorders, PDAs and notes are not allowed in the examination room.
- Personal belongings are left at the reception area and they are the complete responsibility of the candidate. Only key chains and wallets are allowed in the examination room.

Misconduct:

A candidate may be prohibited from taking the examination in any of the following cases:

- Attempting to give or receive information during the examination process.
- Attempting to disturb or abuse other candidates.
- Attempting to record or take the exam for someone else.
- Attempting to display or use pagers, notes or books during the examination.

Following examination:

After finishing the examination, a survey is given to the candidate to give feedback about the exam.

The score report is mailed or delivered to a person to assure confidentiality. No duplicates of the score report will be provided without a written authorization signature of the candidate.

Any additional detail can be provided in the form of a raw score for each of the four major categories.

Candidates failing the examination may reapply; the number of examinations applied by a repeatedly failing candidate is unlimited. But, application and testing can only be once every 90 days.

Copyrights of examination questions:

All the IBQH Bank questions including examination questions and the practice questions are copyrighted by IBQH.

Any attempt to record, copy, reproduce, distribute or display these questions in parts or in form of examinations will subject those involved in such act to justice under the name of laws for copyrights and may be sentenced to civil and criminal penalties.

Disciplinary policy:

IBQH certification program is a voluntary process and not a requirement for employment in the field. Assessing an actual job is beyond the scope of IBQH.

IBQH have the authority to take actions against:

- Applicants who fail to meet board requirements for initial certification.
- Applicants who fail to meet board requirements for recertification

Candidates and applicants may be banned from enrolling in future examinations and the IBQH title could be revoked for those who have earned it in case of:

- Providing wrong information in the application forms, recertification documents or during a random audit procedure.
- Violating rules of examination as:
 1. An attempt to give or receive information during the examination process.
 2. An attempt to have examination material or information from the testing site
 3. The possession and/or distribution of any official testing or examination materials without any authority
 4. Alleged representation of oneself as an IBQH certified professional in quality healthcare.

General information

Inclement weather or emergency:

In cases of temporary cut off of power supplies during examination, the IBQH examination will restart where it has been left off and candidates may resume examination.

IBQH and test centers will also consider any unforeseen circumstances. All efforts will be made to maintain the examination on time and so long as proctors can open the test centers, the examination will be as scheduled.

However, it is still recommended that candidates visit the IBQH website for confirming the availability of the test centers and that the examinations are due on time.

In case the examination was cancelled, a notification letter will be mailed to the candidates for rescheduling their exam once again or reapplication if needed.

Arrangement for special examination accommodations:

Candidates with specific needs may request for the availability of certain accommodations, and they must contact the Pearson VUE customer service team by phone and a proof of eligibility for these accommodations may be required.

All special accommodation needs to be booked in advance via Customer Service center

Continuing Education Credits:

Information on recertification is provided after successfully completing the examination. Recertification requires about 36 credit hours in content of IBQH to be fulfilled.

Content outline for the IBQH examination:

The candidate of the IBQH exam should understand as well as be updated to the current knowledge about the following topics.

1-Leadership:

A. Organizational Structures and Culture:

Define and describe basic organizational designs and characteristics of an organization that determine its culture. Understand the management hierarchy and its influence in an organization.

B. Leadership Challenges:

1. Roles and responsibilities of leaders and managers:

Describe typical roles, responsibilities, and competencies of people in leadership and management positions and how those attributes influence an organization's direction and purpose.

2. Change management:

Use various change management strategies to overcome organizational roadblocks and achieve desired change levels, and review outcomes for effectiveness.

3. Motivating, influencing, negotiating, resolving and empowering:
Apply techniques that support, sustain employee enthusiasm and to empower individuals and teams and implement strategies that enable parties with different or opposing outlooks to recognize common goals and work together, Identify typical obstacles to empowerment and appropriate strategies for overcoming them.

C. Teams and Team Processes:

1. Types of teams:

Understand the different types of teams and their purpose.

2. Stages of team development and team-building techniques:

Define and describe the classic stages of team development, Apply basic team-building steps.

3. Team roles and responsibilities:

Define and describe typical roles related to team support and effectiveness and responsibilities.

4. Team performance and evaluation:

Evaluate teams in relation to established goals and objectives and determine when, why, and how to reward teams and celebrate their success.

2-Strategic Plan Development and Deployment

A. Strategic Planning Models:

Define, describe, and use basic elements of systematic strategic planning models, including mission, vision, and guiding principles relate to the plan.

B. Business Environment Analysis:

1. SWOT analysis:

Analyze an organization's strengths, weaknesses, opportunities, and threats, and develop prioritize actions to take as a result.

2. Market forces and Stakeholder analysis:

Define and describe various forces that drive strategic plans and the needs of various stakeholders to ensure alignment with the organization's strategic objectives.

3. Technology:

Describe the effects that changes in technology can have on strategy formation.

4. Internal capability analysis:

Describe the effects an organization's internal capabilities which influence on strategy formation.

5. Legal and regulatory factors:

Define and describe legal and regulatory factors that can influence strategy formation.

C. Strategic Plan Deployment:

1. Action plans:

Identify basic characteristics of tactics for translating strategic objectives into action and determine whether proposed plans meet these criteria.

2. Resource allocation and deployment:

Evaluate current resources to ensure they are available and deployed in support of strategic initiatives. Identify and eliminate administrative barriers to new initiatives.

3. Organizational performance measurement:

Design and use performance measures to drive and monitor organizational performance, and evaluate the results in relation to the plan.

3-Management Elements and Methods:

A. Management Skills and Abilities:

1. Principles of management:

Define and apply basic management principles.

2. Management theories, styles, and tools:

Define and describe classic studies such and describe how management styles are influenced by organization size, industry sector, competitive position, etc. Identify basic elements of

behavior tools used by managers.

3. Interdependence of functional areas:

Describe the interdependence of an organization's departments or functional areas.

4. Human resources (HR.) management:

Use basic HR. management techniques for employee selection and professional development and ensure that quality responsibilities are present in job descriptions throughout the organization.

5. Financial management:

Read, interprets, and use various finance tools and use the language of cost/profitability to communicate with senior management.

6. Risk management:

Describe and use basic techniques for risk identification, control, and mitigation.

7. Knowledge Management:

Use knowledge management techniques to identify and collect internal knowledge (core competencies) and best practices, to understand and share lessons learned, and use such knowledge in new situations.

B. Communication Skills and Abilities:

1. Communication basics:

Define communication and its role in organizations, Describe nonverbal communication factors and what they convey. Use interpersonal skills and techniques to support effective communication. Deliver different kinds of messages in a variety of situations.

C. Project Management:

1. Understand the basic fundamentals of project management framework and responsibilities of the proper manager in achieving the project success.

2. Understanding the role and the responsibilities of the stakeholders to achieve the project goals.
3. Understanding the project management process groups and knowledge areas
4. Understanding the types of organizational structures regarding the roles and responsibilities of the project manager and project teams.

D. Quality System:

1. Quality mission and policy:

Develop and monitor the quality mission and policy and ensure alignment with the organization's broader mission.

2. Quality planning, deployment, and documentation:

Develop and deploy the quality plan and ensure that it is documented and accessible throughout the organization.

3. Quality system effectiveness:

Use various tools to evaluate the effectiveness of the quality system.

4. ISO and other third-party standards:

Define and describe how ISO Standards can be used to support quality management systems.

5. Other quality methodologies:

Describe and differentiate programs such as total quality management (TQM), continuous quality improvement (CQI), six sigma, benchmarking.

6. Quality philosophies:

Define and describe the basic methodologies and theories proposed by quality leaders such as Deming, Juran, Crosby, Feigenbaum, Ishikawa, and others.

4-Quality Management Tools:

A. Problem-Solving Tools:

1. Quality tools and basic management and planning tools:

Select, interpret and apply these tools in various situations.

2. Process improvement tools:

Select, interpret and apply tools such as root cause analysis, PDCA, Six Sigma in various situations.

3. Innovation and creativity tools:

Use various techniques and exercises for creative decision-making and problem-solving.

4. Cost of quality (COQ):

Define and distinguish between prevention, appraisal, internal, and external failure cost categories and the impact that changes in one category will have on the others.

B. Process Management:

1. Process goals:

Describe how process goals are established, monitored, and measured and what impact they will have on product or service quality.

2. Process analysis:

Use process mapping, flowcharting, and other visual aids to analyze a process and compare it to written procedures, work instructions, and other documents.

3. Lean tools:

Identify and apply lean tools and processes.

C. Theory of constraints (TOC):

Define key concepts of TOC and classify various types of constraints

D. Measurement, Assessment and Metrics:

1. Basic statistical use:

Use techniques to identify when, what, and how to measure projects and processes. Describe how metrics and data gathering methods affect people and vice-versa.

2. Sampling:

Define and describe basic sampling techniques and when sampling is appropriate.

3. Statistical analysis:

Apply basic statistical techniques to monitor processes and

make data-based decisions.

4. Trend and pattern analysis:

Read and interpret data sets, graphs, charts, etc., and identify various trends such as cyclical, seasonal, environmental, etc., and patterns such as shifts, etc.

5. Theory of variation:

Differentiate between common and special causes of variation.

6. Process capability:

Determine the capability of a process in terms of C_p and C_{pk} indices.

7. Reliability and validity:

Use measurement theories of reliability and validity to guide the development of survey instruments and to support inferences about the data gathered by them.

8. Qualitative assessment:

Identify subjective measures and how they differ from objective measures, and determine when measurements should be made in categories rather than in terms of numeric value.

9. Survey analysis and use:

Analyze survey results and ensure that they are interpreted and used correctly.

5-Customer Focused Organizations:

A. Customer Identification and Segmentation:

1. Internal customers:

Define and describe the impact an organization's treatment of internal customers will have on external customers, and develop methods for energizing internal customers to improve products, processes, and services.

2. External customers:

Define and describe external customers and their impact on products and services, and develop strategies for working with them to improve products, services, and internal processes.

B. Customer Relationship Management:

1. Customer needs:
Use various tools and techniques to identify and prioritize customer needs and expectations.
2. Customer satisfaction and loyalty:
Develop systems to capture customer perceptions and experiences using a variety of feedback mechanisms.
3. Basic customer service principles:
Describe and develop strategies for deploying and supporting principles.
4. Multiple and diverse customer management:
Establish and monitor priorities to avoid and resolve conflicting customer requirements and demands.

6- Supply Chain Management:

A. Supplier Selection and Supplier Certification, Partnerships, and Alliances:

1. Define and develop selection criteria and identify and manage their impact on various internal processes of the organization.
2. Design and implement supplier certification programs and identify strategies for developing customer-supplier partnerships and alliances.

B. Supplier Communications:

Design and implement techniques for communicating with suppliers.

C. Supplier Performance:

Define and describe common measures of supplier performance.

D. Supplier Improvement:

Design and conduct supplier audits, evaluate corrective and preventive action plans, provide feedback, and monitor for process improvement.

E. Supplier Logistics:

Describe the impact purchased products and services have on final product assembly or total service package.

7-Training and Development:

A. Training Plans and Needs:

Develop and implement training plans that are aligned with the organization's strategic plan and general business needs. Use various tools and techniques to develop and implement training needs analysis

B. Training Materials/Curriculum Development and Delivery:

Use various tools, resources, and methodologies to develop training materials and curricula that address adult learning principles and the learning needs of an increasingly diverse workforce.

C. Training Effectiveness and Evaluation:

Describe and implement various ways of measuring training effectiveness.

8-Information Management:

A. Design and Data Collection:

1. Maintain confidentiality of performance improvement and records.
2. Aggregate/summarize data for analysis and Organize information for committee meetings.
3. Collect qualitative and quantitative data.
4. Perform or coordinate data inventory listing activities, data definition activities and data collection methodology.
5. Implement computerized systems for data collection and analysis.
6. Evaluation of computer software applications for data collection and analysis.
7. Use epidemiological theory in data collection and analysis.

B. Measurement:

1. Use or coordinate the use of process analysis tools to display data.
2. Use basic statistical techniques to describe data.
3. Use the results of statistical techniques to evaluate data.

C. Analysis:

1. Use comparative data to measure or analyze performance.
2. Interpret benchmarking data.
3. Interpret incident/occurrence reports.
4. Interpret data to support decision making.

D. Communication:

1. Interact with medical staff and support personnel regarding individual patient management issues.
2. Promote organizational values and commitment among staff.
3. Compile and write performance improvement reports.
4. Integrate quality concepts within the organization.
5. Coordinate the dissemination of performance improvement information within the organization.
6. Ensure accuracy in public reporting activities.
7. Facilitate communication with accrediting and regulatory bodies.

9-Performance Measurement and Improvement:

A. Planning:

1. Facilitate establishment of priorities for process Improvement activities.
2. Facilitate development of performance improvement action plans and projects.
3. Facilitate development or selection of process and outcome measures.
4. Facilitate evaluation or selection of evidence-based practice guidelines.
5. Participate in the development of clinical/critical pathways or guidelines.
6. Aid in evaluating the feasibility to apply for external quality awards.

B. Implementation:

1. Coordinate the performance improvement process.
2. Lead performance improvement teams.
3. Participate in the credentialing and privileging process.
4. Coordinate or participate in quality improvement projects.
5. Participate in the process of medication usage review, infection control processes, peer review, service specific review and patient advocacy (e.g., patient rights, ethics).
6. Perform or coordinate risk management: risk prevention, risk identification, mortality review, and failure mode and effects

analysis and collaborate with quality department.

C. Education and Training:

1. Develop, Provide and Evaluate organizational performance improvement Training.
2. Facilitate change within the organization through education.
3. Develop/provide survey preparation training.

D. Evaluation and Integration:

1. Evaluate team performance.
2. Analyze/interpret performance/productivity reports.
3. Analyze patient/member/customer satisfaction.
4. Conduct or coordinate practitioner profiling.
5. Perform or coordinate complaint analysis.
6. Incorporate performance improvement into the employee performance appraisal system.
7. Incorporate findings from performance improvement into the credentialing/appointment/privilege delineation process.
8. Integrate results of data analysis into the performance improvement process.
9. Integrate outcome of risk management assessment into the performance improvement process.
10. Integrate outcome of utilization management assessment into the performance improvement process.
11. Integrate quality findings into governance and management activities (e.g., bylaws, administrative policies, and procedures).
12. Integrate accreditation and regulatory recommendations into the organization.

10-Patient Safety

A. Strategic:

1. Facilitate assessment and development of the organization's patient safety culture.
2. Identify applicability of patient safety goals.
3. Facilitate development of a patient safety program.
4. Link patient safety activities with strategic goals.

5. Integrate patient safety concepts within the organization.
6. Integrate patient safety findings into governance and management activities (e.g., bylaws, administrative policies, and procedures).

B. Operational:

1. Contribute to development and revision of a written plan for a patient safety program.
2. Coordinate a patient safety program.
3. Assess how technology can enhance the patient safety program and integrate it to enhance the patient safety program.
4. Integrate patient safety goals into organizational activities.
5. Participate in the process of patient safety goals review.
6. Participate in the process of patient safety goals review.
7. Perform or coordinate risk management e.g. Incident report review sentinel/unexpected event review and root cause analysis.

11- Utilization management:

1. Evaluate of the appropriateness, medical needs and efficiency of health care services, procedures and facilities.
2. Design Utilization Management Program to ensure the delivery of high quality, cost-efficient health care for its members.
3. Review the proposed site of service, and review the health care resources required or the proposed procedure or treatment.
4. Establish discharge planning, catastrophic case management and other health care review or benefit coordination services.

12- Environmental Health and Safety:

1. Audit and manage the Environment Of Care (EOC) and efficiently use the EOC Performance Indicators.
2. Design, implement and audit Emergency Management Plan (EMP) for the healthcare organization.
3. Audit Fire prevention and protection in healthcare organization according to latest OSHA regulations.
4. Promote the awareness and safety measures for hazardous materials used in healthcare organizations.

5. Recommend and audit the safety measures for compressed Gases according to the latest OSHA regulations.

13-Infection control:

A.Epidemiology of infection:

1. Reservoirs of Microorganisms.
2. Sources of Microorganism.
3. Routes of Microbial Transmission.

B. Hospital acquired infection:

1. Types of hospital acquired infection.
2. Factor that affect Risk of acquiring infection in hospital.
3. Hospital Pathogens.
4. Antibiotic therapy.

C. Principals of infection control program:

1. Infection prevention and control Organizational structure.
2. Standard precautions.
3. Hand hygiene.
4. Personal protective equipment (PPE).
5. Aseptic technique.
6. Reprocessing of instruments and equipment.
7. Environmental control in healthcare.
8. Cleaning, disinfection and spills management.
9. Laundry.
10. Air and water.
11. Sanitary Waste disposal.

Sample questions:

1.Healthcare facilities can be any of the following except:

- a) Hospitals
- b) Dialysis units
- c) Outpatient clinics
- d) Nurse school

2.Which of the following protective equipment can be used for respiratory protection?

- a) Goggles

- b) Gown
- c) Mask
- d) Gloves

3. All of the following compressed gases are used within healthcare facilities except:

- a) Oxygen
- b) Carbon Dioxide
- c) Carbon monoxide
- d) Anesthetic gases