



DEDER GENERAL HOSPITAL

OUTPATIENT DEPARTMENT

Standard Treatment Guideline (STG) Adherence Monitoring Report

Clinical Focus: Asthma Management

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June 2017E.C.

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1. Introduction

Asthma is one of the leading causes of chronic respiratory illness in Ethiopia, impacting both children and adults. Uncontrolled asthma leads to frequent hospital visits, absenteeism from work or school, and increased healthcare costs. The Ethiopian Ministry of Health's **Standard Treatment Guidelines (STG)** offer a framework for diagnosis, treatment, and long-term management. This report evaluates the extent to which healthcare providers at Deder General Hospital adhered to these guidelines during the **10th Months of 2017 E.C.**

2. Aim

To measure the level of adherence to the National Standard Treatment Guidelines in the management of asthma at Deder General Hospital, and to guide continuous quality improvement efforts.

3. Objectives

- To assess compliance with STG-based asthma diagnosis, treatment, and follow-up.
- To evaluate provider performance across 12 critical parameters.
- To compare current performance with previous audits and track improvements.
- To document successful interventions and areas needing ongoing attention.
- To promote sustainable, protocol-driven asthma management practices.

4. Methodology

4.1 Study Design

A descriptive, cross-sectional study was conducted using standard checklist tools.

4.2 Sampling technique

- ❖ **Sample Size:** 10 randomly selected patient charts
- ❖ **Period Reviewed:** June 2017 E.C.
- ❖ **Departments:** OPD

4.3 Inclusion Criteria

- ❖ Patients diagnosed with asthma during the audit period
- ❖ Full documentation of diagnosis, treatment plan, and follow-up
- ❖ Managed according to STG protocol during the 10th Month 2017 EC

4.4 Exclusion Criteria

- ❖ Incomplete charts or missing follow-up documentation
- ❖ Asthma cases handled outside of STG (e.g., alternative therapies)
- ❖ Previously diagnosed patients with no active treatment this month

4.5 Data Collection Tools

- ❖ Structured STG Adherence monitoring tools for asthma based on STG asthma protocol
- ❖ Patient chart review
- ❖ Provider interview (if clarification needed)

5. Results

The evaluation of STG adherence in asthma management for June 2017 E.C. revealed outstanding performance, with a 100% compliance rate across all nine assessed criteria. Every case reviewed demonstrated full adherence to guidelines, including proper diagnosis, appropriate medication prescriptions, acute exacerbation management, oxygen therapy, comorbid condition management, respiratory function monitoring, patient education on inhaler techniques, trigger avoidance counseling, and regular follow-up. This perfect compliance indicates a highly effective implementation of asthma treatment protocols, ensuring consistent, evidence-based care for all patients (**Table 1**).

The absence of non-compliant cases (0 out of 90) underscores the healthcare team's strong commitment to STG standards. Notably, critical aspects such as patient education on inhaler use and trigger avoidance—often areas of variability—achieved full compliance, reflecting robust training and patient engagement practices. These results suggest that the system in place for asthma management is not only well-structured but also meticulously followed, contributing to optimal patient outcomes and setting a benchmark for sustained excellence in chronic disease care (**Table 1**).

Table 1: STG Adherence – Asthma Management (June, 2017 E.C.)

S/N	Criteria	Compliant (Yes)	Non-Compliant (No)	Compliance (%)
1.	Proper diagnosis based on symptom criteria	10	0	100%
2.	Appropriate prescription of inhaled corticosteroids	10	0	100%
3.	Short-acting bronchodilator uses during acute exacerbation	10	0	100%
4.	Oxygen therapy administered as needed	10	0	100%
5.	Management of comorbid allergies or conditions	10	0	100%
6.	Monitoring of respiratory function during treatment	10	0	100%
7.	Patient education on proper inhaler technique	10	0	100%
8.	Trigger identification and avoidance counseling	10	0	100%
9.	Regular follow-up for chronic asthma	10	0	100%
	Total Performance	90/90	0	100%

6. Discussion

The findings from this audit demonstrate exemplary adherence to Standard Treatment Guidelines (STGs) in asthma management, with a **100% compliance rate** across all evaluated criteria. This exceptional performance reflects a well-established system where healthcare providers consistently follow evidence-based protocols in diagnosis, treatment, and patient education. The perfect compliance in critical areas—such as correct medication use, oxygen therapy, and inhaler technique training—suggests that clinical staff are highly knowledgeable and diligent in applying best practices. Such uniformity in care likely contributes to better asthma control, reduced hospitalizations, and improved patient outcomes, aligning with global standards for respiratory disease management.

While these results are commendable, maintaining this high level of compliance requires continuous effort. Potential challenges, such as staff turnover, evolving guidelines, or patient diversity, could impact future performance. To sustain this standard, periodic refresher training, regular audits, and patient feedback mechanisms should be implemented. Additionally, expanding the scope of monitoring to include long-term patient outcomes (e.g., asthma control test scores or exacerbation rates) could provide deeper insights into the real-world effectiveness of these guidelines. By proactively addressing these areas, the healthcare facility can ensure that its asthma management program remains a model of excellence in chronic care.

7. Recommendations

- 🔗 Maintain high performance through regular M&E

8. Action Plan

- 🔗 **No Gap**

9. Previous Action Plan Implementation Status

Proposed Action	Implementation Status
Develop and display job aids on inhaler techniques	Fully Resolved

11. References

1. Ethiopian Ministry of Health (2016). **Standard Treatment Guidelines for General Hospitals**
2. WHO (2022). **Global Initiative for Asthma (GINA) Strategy Report**
3. Deder General Hospital Quality Improvement Office. Internal Audits, 2016–2017 E.C.
4. Institute for Healthcare Improvement (IHI). **Managing Chronic Illness at Facility Level**