



DEDER GENERAL HOSPITAL

Pediatrics Ward Case Team

Discharge planning protocol

Utilization Monitoring Report

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Report Period: 4th Quarter of 2017E.C

Deder, Oromia

June 2017E.C

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Introduction

This report evaluates the utilization of the discharge planning protocol in the Pediatrics Ward at Deder General Hospital. The assessment focuses on compliance with key criteria outlined in the protocol, including early identification, multidisciplinary team involvement, patient and caregiver education, post-discharge care arrangements, social and financial support, discharge summary documentation, follow-up and monitoring, and barriers and solutions.

The goal is to ensure that the discharge process is efficient, patient-centered, and compliant with hospital standards, thereby enhancing patient satisfaction and reducing readmission rates.

Discharge planning involves multiple steps, including ensuring the neonate meets discharge criteria, involving multidisciplinary teams, educating families, completing documentation, scheduling follow-up appointments, and providing necessary instructions for emergency care. The effectiveness of these processes directly impacts patient safety, family preparedness, and overall satisfaction.

OBJECTIVE

The objectives of this monitoring report are:

1. To assess compliance with the discharge planning protocol.
2. To identify areas of strength and opportunities for improvement.
3. To provide recommendations for enhancing the effectiveness of the discharge process.

METHODOLOGY

Assessment Tool

A checklist-based approach was used to evaluate compliance with 40 criteria across eight key areas of the discharge planning protocol. Each criterion was scored as “Compliant (1)” or “Non-Compliant (0).” Additionally, post-discharge feedback from ten patients was collected to assess their satisfaction and understanding of the discharge process.

RESULT

The Pediatrics Ward demonstrated exemplary performance in its Discharge Planning processes during June 2017, achieving perfect **100% compliance** across all monitored criteria. With all 80 applicable criteria met (80/80), the ward exhibited flawless execution in every aspect of discharge planning, reflecting a highly reliable and systematically integrated approach to patient transitions out of the hospital. This exceptional result underscores a consistently robust adherence to protocols and a commitment to comprehensive discharge coordination.

This outstanding overall compliance was driven by uniform excellence in all eight specific domains. The ward attained perfect 100% scores in **Early Identification of discharge needs, Multidisciplinary Team Involvement, Patient and Caregiver Education, Post-Discharge Care Arrangements, Social and Financial Support coordination, Discharge Summary and Documentation, Follow-Up and Monitoring** plans, and proactive identification of **Barriers and Solutions**. The absence of any non-compliant instances (0/80) across such diverse and critical components confirms a deeply embedded culture of thoroughness and patient-centered care, ensuring safe and well-supported discharges for all pediatric patients. This level of consistency highlights operational excellence and minimizes risks associated with care transitions (**Table 1**).

Table 1: Pediatrics Ward Discharge Planning monitoring performance, June 2017E.C

Criteria	Compliant (1)	Non-Compliant (0)	Compliance rate (%)
Early Identification	10	0	100
Multidisciplinary Team Involvement	10	0	100
Patient and Caregiver Education	10	0	100
Post-Discharge Care Arrangements	10	0	100
Social and Financial Support	10	0	100
Discharge Summary and Documentation	10	0	100
Follow-Up and Monitoring	10	0	100
Barriers and Solutions	10	0	100
Overall performance	80/80	0/80	100%

DISCUSSION

The Pediatrics Ward demonstrated **exceptional excellence** in discharge planning during June 2017, achieving a flawless **100% compliance rate** across all 80 monitored criteria. This perfect score reflects a deeply embedded, highly reliable system for managing patient transitions out of the hospital. The absence of any non-compliant instances indicates rigorous adherence to established protocols and consistent execution of best practices at every stage—from early identification of discharge needs through to post-discharge follow-up. Such uniform excellence across all eight domains suggests robust process integration and a strong institutional commitment to seamless care coordination.

The perfect scores in **Early Identification, Multidisciplinary Team Involvement, Patient/Caregiver Education, and Social/Financial Support** highlight a culture prioritizing proactive, holistic, and patient-centered care. Success in **Barriers and Solutions** further indicates effective preemptive problem-solving, while 100% compliance in **Discharge Documentation and Follow-Up Monitoring** ensures continuity and accountability. This exemplary performance sets a benchmark for operational excellence, directly contributing to enhanced patient safety, reduced readmission risks, and optimized resource use. Sustaining this level of reliability requires continuous monitoring, but these results affirm the ward's discharge process as a model of systematic efficiency and clinical thoroughness.

RECOMMENDATIONS

- ❖ Maintain current performance through regular monitoring and evaluation

ACTION PLAN/PERFORMANCE IMPROVEMENT PLAN

- ❖ No Major gap seen



Guyyaa/ቁጥር/Date: _____ / _____ / _____

- ❖ Garee tajaajila Pedi Ward irraa
- ❖ Garee Qulquullina Tajaajila Fayyaatiif

Dhimmi: waa'ee Gabaasa Structural protocol mon erguu ilaala

Akkuma mata Dureerrattii ibsamuuf yaalameettii Structural protocol “**Discharge Planning**” Jedhamu kan kurmaana **4ffaa** bara **2017** xalayaa **Fuula 10** qabuu gaggeessituu kana waliin walqabsiifnee isiiniif eerguu keenya kabajaan isiniif beeksiifnaa.

Nagaya wajiin!!