

Deder General Hospital

Surgical Ward – Patient Transportation Protocol
Monitoring Report



Table of contents

Contents

Introduction	3
Objectives	3
Methodology	3
Results	3
Performance Summary Table	4
Discussion	5
Strengths Observed	5
Areas for Improvement	5
Recommendations	5
Action Plan	6
Conclusion	6
Sign-Off	Error! Bookmark not defined.

Introduction

Effective intra-hospital transportation of patients is a critical component of safe, timely, and high-quality surgical care. The **Patient Transportation Protocol** at Deder General Hospital serves to guide clinical and support staff in executing safe, standardized, and efficient patient transfers across departments, operating rooms, diagnostic areas, and wards. In the **Surgical Ward**, where patients are often acutely ill or recovering from complex procedures, transportation must be conducted with meticulous planning and attention to detail.

This monitoring report evaluates the adherence to the patient transportation protocol in the **Surgical Ward**, with the goal of identifying strengths, uncovering gaps, and recommending targeted interventions to improve safety and performance.

Objectives

- To assess compliance with the institutional Patient Transportation Protocol in the Surgical Ward.
- To identify potential risks or deviations in practice that could compromise patient safety.
- To develop corrective strategies and ensure high standards are maintained across all transport scenarios.

Methodology

- **Sample Size:** 13 surgical patients who underwent intra-hospital transport during the review period.
- **Monitoring Period:** July 2017 (E.C. 2017).
- **Data Collection Tools:**
 - Structured observation checklist
 - Interviews with patients (or caregivers) and transport team members
 - Review of nursing transport records
- **Scoring:** Each of the 9 protocol criteria was scored as **Compliant (Yes)** or **Non-Compliant (No)**.
- **Analysis:** Compliance rate per criterion was calculated, and overall performance was summarized in percentage terms.

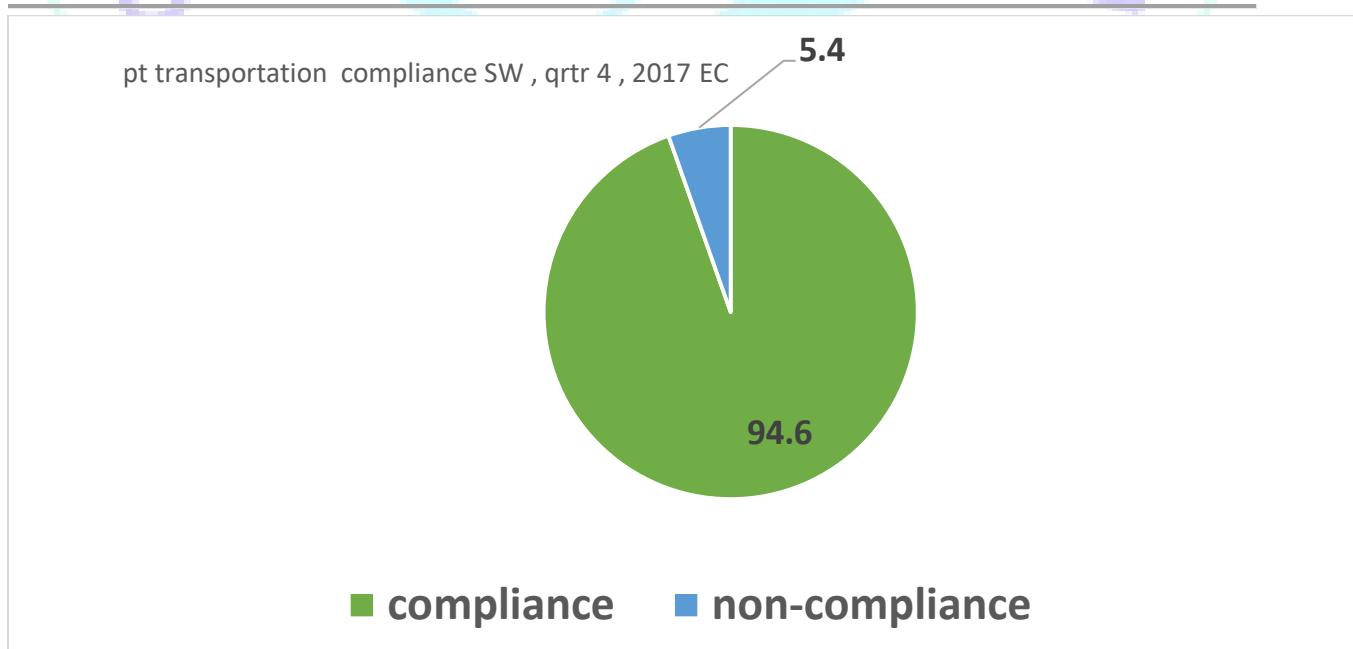
Results

The **overall compliance rate** for the Surgical Ward in July 2017 was **94.6%**. Out of **117 possible data points** ($13 \text{ patients} \times 9 \text{ criteria}$), **110** were **compliant**, and **7** were **non-compliant**, with the **only gap occurring in the availability of necessary medical equipment during transport.**

Performance Summary Table

No.	Transportation Criteria	Compliant (Yes)	Non-Compliant (No)	Compliance Rate
1	Proper Identification (Name, MRN, wristband)	13	0	100%
2	Clear Communication with Patient	13	0	100%
3	Transport Team Briefed on Patient's Condition	13	0	100%
4	Necessary Medical Equipment Available	9	4	69%
5	Safe Transfer Techniques Used	13	0	100%
6	Safety Precautions Followed (e.g., belts, bed rails)	13	0	100%
7	Minimal Delays in Transport	13	0	100%
8	Proper Handover at Destination	13	0	100%
9	Infection Control Measures Applied	13	0	100%
Total		110	7	94.6%

Graph: Patient Transportation Adherence , 2017EC



Discussion

The monitoring exercise revealed that the **Surgical Ward of Deder General Hospital has demonstrated excellent adherence** to the patient transportation protocol in nearly all domains. Key practices such as **patient identification, communication, safety precautions, proper handover, and infection control** were executed with full compliance across all cases.

The **only area requiring improvement** was the **availability of necessary medical equipment during patient transport**, where compliance was **69%**. In four instances, essential portable medical tools—such as oxygen cylinders, suction machines, or emergency medications—were either not available or not prepared adequately prior to transport. Although no adverse events occurred during these transfers, the presence of such gaps exposes patients—particularly post-operative or unstable surgical patients—to avoidable risk.

Strengths Observed

- High level of teamwork and role clarity during transports.
 - Consistent use of patient identification and safety measures.
 - Good communication between sending and receiving departments.
 - Positive patient feedback indicating comfort and reassurance during transfers.
-

Areas for Improvement

- Equipment gaps noted in some transports.
 - No pre-transport checklist currently in use to verify equipment readiness.
 - Transport carts not uniformly stocked with standard supplies.
-

Recommendations

1. **Implement Mandatory Pre-Transport Equipment Checklist**
 - To be used before every patient transfer by responsible staff.
2. **Stock and Maintain Emergency Transport Kits**
 - Include oxygen, suction, IV supplies, Ambu bag, and basic drugs.
3. **Assign Equipment Readiness Responsibility**
 - Clear tasking to designated team members to verify readiness.
4. **Conduct Monthly Compliance Audits**
 - To track improvements and prevent recurrence of lapses.

Action Plan

Area of Concern	Recommended Action	Responsible Personnel	Timeline	Monitoring Method
Medical Equipment Availability	Prepare and introduce standardized transport checklist	Ward Nurse, Case Manager	Immediate	Checklist review during daily rounds
	Equip and maintain transport carts with emergency kits	Biomedical Team, Logistics Officer	Immediately	Weekly equipment check log
	Assign staff responsible for checking equipment before every transport	Transport Coordinator, Shift Leader	Immediate	Transport log documentation
	Provide refresher training on emergency preparedness for transport	Nursing Education Unit	Immediately	Attendance records, pre/post-test assessment
Sustainability & Follow-Up	Include transport audit as part of routine ward quality indicators	Quality Improvement (QI) Team	Ongoing	Quarterly audit report and feedback loop

Conclusion

The July 2017 monitoring of the **Surgical Ward's adherence to the Patient Transportation Protocol** at Deder General Hospital shows an overall strong performance, with **94.6% compliance**. Most areas of the protocol are implemented with excellence and consistency, contributing to safer and smoother patient transfers.

Nevertheless, **immediate attention is required to address the gap in medical equipment readiness** during transport. By executing the outlined action plan and reinforcing team accountability, the ward can close this gap and move towards 100% protocol adherence.