



DEDER GENERAL HOSPITAL

Outpatient Department

Interdepartmental Consultation Protocol Monitoring Report

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Deder, Oromia

June 2017E.C

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INTRODUCTION

In simple terms a consult is a request made from one physician or provider to another physician or provider to give an opinion or advice on a specific patient. A consultation is usually sought when a physician or provider with primary responsibility for a patient recognizes conditions or situations that are beyond his or her training or expertise. An effective consult should always be performed with the patient's best interest in a positive impact on the patient's Care. Open communication between the referring physician or provider and the consult provider is essential for effective consultation

Since 2015 Deder General Hospital was having **Interdepartmental consultation protocol** for use by clinical staff when the consultation needed.

The protocol details procedures to be followed while introducing the bad news breaking to the clients. To ensure this the monitoring for the adherence of this protocol is conducted on quarterly basis.

OBJECTIVES

General objective

- ❖ To give appropriate, comprehensive and quality of care for patients

Specific objectives

- ❖ To determine specific diagnosis and give specific treatment
- ❖ To increase quality of care in Hospital
- ❖ To minimize preventable deaths in Hospital
- ❖ To reduce consultation delayance

METHODOLGY

- ❖ **Tool Used:** Structured Consultation Monitoring Checklist
- ❖ **Requesting Unit:** OPD
- ❖ **Sample Size:** 8 Consultation Cases
- ❖ **MRNs Reviewed:** Mrn 01 to Mrn 08
- ❖ **Data Sources:** Medical records, consultation forms, staff feedback
- ❖ **Criteria Assessed:** 6 major areas with 21 indicators

Table 1:Verification Criteria

Criteria	Verification Criteria
1. Consultation Request Process	
1.1	Was the consultation request properly documented?
1.2	Was the consultation request clear and detailed?
1.3	Was the request sent through the appropriate channel (e.g., electronic or paper)?
1.4	Did the requesting department clearly state the reason for consultation?
2. Timeliness of Consultation	
2.1	Was the consultation responded to within the agreed timeframe? (e.g., within 24 hours)
2.2	If urgent, was the consultation responded to within the specified urgent response time?
3. Quality of Response	
3.1	Was the consultation addressed by the appropriate specialist or department?
3.2	Was the response to the consultation complete and thorough?
3.3	Did the consulting department provide actionable recommendations?
3.4	Were diagnostic tests or additional investigations recommended where necessary?
3.5	Was there clear communication regarding the next steps or follow-up?
4. Collaboration and Communication	
4.1	Was there an opportunity for discussion between departments following the consultation?
4.2	Were there any issues of miscommunication between departments?
5. Outcome of Consultation	
5.1	Was the patient's issue resolved or improved as a result of the consultation?
5.2	Were follow-up actions or another consultation required?
5.3	Was patient care improved as a result of the consultation?

RESULTS

The Outpatient Department (OPD) demonstrated exceptional performance in its Interdepartmental Consultation Protocol during June 2017EC, achieving a perfect overall compliance rate of 100%. All 120 criteria assessed across 12 specific verification points and 5 key components were fully met ("Scored Yes") with zero deficiencies ("Scored No"). This flawless result, based on the review of 8 patient charts, indicates that every aspect of the consultation process was executed according to protocol standards throughout the monitoring period. The comprehensive nature of the audit, covering request documentation, timeliness, response quality, collaboration, and outcomes, underscores the robustness of the OPD's interdepartmental consultation system (**Table 1**).

The 100% compliance was uniformly achieved across every single criterion and category. This includes perfect scores in all elements of the Consultation Request Process (proper documentation, clarity, appropriate channel), Timeliness (stated reason, response within agreed/urgent timeframes), Quality of Response (appropriate specialist, completeness, actionable recommendations), Collaboration & Communication (clear next steps, opportunity for discussion), and Outcome of Consultation (issue resolved/improved, documented follow-up needs, care improvement). The consistency across all 8 charts reviewed demonstrates a highly reliable process. Such comprehensive adherence signifies efficient systems, effective communication between departments, high-quality specialist input, and ultimately, successful patient outcomes linked directly to the consultation process. This level of performance sets a very high benchmark for interdepartmental coordination in the outpatient setting (**Table 1**).

Table 2: OPD Interdepartmental consultation protocol monitoring, June, 2017EC

Criteria	Verification Criteria	Total chart (#)	Scored Yes(#)	Scored No(#)	% of performance
Consultation Request Process	Was the consultation request properly documented?	8	8	0	100
	Was the consultation request clear and detailed?	8	8	0	100
	Was the request sent through the appropriate channel (e.g., electronic or paper)?	8	8	0	100
Timeliness of Consultation	Did the requesting department clearly state the reason for consultation?	8	8	0	100
	Was the consultation responded to within the agreed timeframe? (e.g., within 24 hours)	8	8	0	100
	If urgent, was the consultation responded to within the specified urgent	8	8	0	100
Quality of Response	response time?	8	8	0	100
	Was the consultation addressed by the appropriate specialist or department?	8	8	0	100
	Was the response to the consultation complete and thorough?	8	8	0	100
	Did the consulting department provide actionable recommendations?	8	8	0	100
Collaboration and Communication	Was there clear communication regarding the next steps or follow-up?	8	8	0	100
	Was there an opportunity for discussion between departments following the consultation?	8	8	0	100
	Was the patient's issue resolved or improved as a result of the consultation?	8	8	0	100
	Were follow-up actions or another consultation required?	8	8	0	100
	Was patient care improved as a result of the consultation?	8	8	0	100
	Overall performance	120	120	0	100%

DISCUSSION

The results from the June 2017 EC monitoring of the OPD Interdepartmental Consultation Protocol reveal **exceptional and comprehensive adherence** to established standards, achieving a perfect overall compliance rate of 100% across all 120 criteria evaluated in 8 patient charts. This flawless performance signifies that every single verification point within the five key components – Consultation Request Process, Timeliness, Quality of Response, Collaboration & Communication, and Outcomes – was met without exception. Such uniform excellence across a detailed set of 12 specific criteria demonstrates a remarkably robust and consistently applied consultation system within the Outpatient Department. It indicates that the protocols for initiating, processing, responding to, and following up on consultations are not only well-designed but are also thoroughly understood and meticulously executed by all participating departments and staff. This level of reliability is critical in the outpatient setting, where efficient coordination directly impacts patient flow, diagnostic clarity, and timely management.

The significance of this 100% compliance rate lies in its breadth and its direct implications for patient care and operational efficiency. Perfect scores in criteria such as **response timeliness (including urgent requests), provision of actionable recommendations, clear communication of next steps, documented opportunities for inter-departmental discussion, and resolution/improvement of patient issues** collectively demonstrate a highly effective process. This consistency suggests strong interdisciplinary collaboration, effective communication channels (both electronic and paper), and a shared commitment to quality among consulting specialists. The perfect outcome metrics – particularly the resolution/improvement of patient issues and documented improvement in care – strongly link the consultation process to tangible positive patient impacts. While this single-month audit presents an optimal picture, it underscores the effectiveness of the current system. Maintaining this standard requires continuous vigilance. Future monitoring should aim to confirm sustainability across a larger sample size and over a longer period, and could explore qualitative feedback to identify any potential areas for enhancement not captured by these quantitative metrics. This result sets a very high benchmark for outpatient interdepartmental coordination.

RECOMMENDATIONS

- ☛ Maintain current performance through regular **monitoring and evaluation**

ACTION PLAN/PERFORMANCE IMPROVEMENT PLAN

- ☛ No Major gap seen



Guyyaa/ቁጥር/Date: _____ / _____ / _____

- ❖ Garee tajaajila OPD irraa
- ❖ Garee Qulquullina Tajaajila Fayyaatiif

Dhimmi: waa'ee Gabaasa Structural protocol mon erguu ilaala

Akkuma mata Dureerrattii ibsamuuf yaalameettii **Structural protocol** “**Interdepartmental Consultation**” Jedhamu kan kurmaana **4ffaa** bara **2017** xalayaa **Fuula 9** qabuu gaggeessituu kana waliin walqabsiifnee isiiniif eerguu keenya kabajaan isiniif beeksiifnaa.

Nagaya wajiin!!