


***Date: June 02, 2017E.C***

 **To:** Health Service Quality Unit

 **From:** Gynecology and Obstetrics Department



**Subject:** Monthly Quality Improvement Report: Reducing Irrational Drug Use May 2017.

**Dear Colleagues,**

We are delighted to share the progress report for the Reducing Irrational Drug Use (IDU) Quality Improvement (QI) initiative for **May 2017**.


This month, we distributed the Essential Drug List (EDL) to all 35 prescribers, posted EDLs in 12 prescribing areas, installed "Check the EDL" visual reminders, and conducted the second monthly audit (10 prescriptions).

**Key Results for May 2017:**

 **IDU Rate:** 0% (Target: ≤5%)  Target Achieved

 **EDL Availability:** 100% (Target: 100%)  Fully Implemented

 **Key Learnings & Challenges:**

 The IDU rate reached 0%, with all 10 prescriptions fully compliant. The EDL and visual reminders were highly effective, and prescribers reported high satisfaction. No non-compliant cases were identified, and no significant challenges were observed.

 Thank you for your collaboration as we sustain these gains in Sene.

***Sincerely,***

**Dr. Taju Abdi (Senior)-Team Leader**

# **DEDER GENERAL HOSPITAL**

**SUSTAINING IMPROVEMENT IN REDUCING IRRATIONAL DRUG USE (IDU):**

## **A QUALITY IMPROVEMENT PROJECT**

**QI Team Lead: Dr. Taju Abdi-GYN/OBS Specialist**

**Facilitator: Abdi Tofik (BSc, MPH)-HSQ Director**

**Reporting Period: May 01-30, 2017**

# DEDER GENERAL HOSPITAL

## SUSTAINING IMPROVEMENT IN REDUCING IRRATIONAL DRUG USE (IDU):

### A QUALITY IMPROVEMENT PROJECT

#### 1. PLAN

**Cycle Focus:** Practical Support

**Aim:** Sustain IDU rate below 5% through EDL implementation

**Interventions:**

- Distribute weekly Essential Drug List (EDL)
- Post EDL in all prescribing areas
- Install visual reminders at prescribing stations
- Conduct second monthly audit (10 prescriptions)

#### 2. DO

**Activities Completed:**

- Distributed EDL to all 35 prescribers
- Posted EDL in 12 prescribing areas
- Installed "Check the EDL" visual reminders
- Completed second audit (10 prescriptions)

#### 3. STUDY

Indicator	Target	Ginbot	Trend
IDU Rate	≤5%	0%	✓ Target Achieved
EDL Availability	100%	100%	✓ Fully Implemented

**Results:**

- IDU Rate: 0% (improved from 10%)
- EDL Availability: 100%
- 10/10 prescriptions compliant

# DEDER GENERAL HOSPITAL

## SUSTAINING IMPROVEMENT IN REDUCING IRRATIONAL DRUG USE (IDU):

### A QUALITY IMPROVEMENT PROJECT

#### Prescription Audit Report

**Sample Size:** 10 prescriptions

**Audit Criteria:** 5 Components of Irrational Drug Use (WHO/INRUD)

Prescription ID	Correct Drug?	Correct Dose?	Correct Duration?	Necessary?	Follows STG/EDL?	Overall Compliant?
329842	Y	Y	Y	Y	Y	Y
343248	Y	Y	Y	Y	Y	Y
343590	Y	Y	Y	Y	Y	Y
340448	Y	Y	Y	Y	Y	Y
061941	Y	Y	Y	Y	Y	Y
343688	Y	Y	Y	Y	Y	Y
070961	Y	Y	Y	Y	Y	Y
343926	Y	Y	Y	Y	Y	Y
344211	Y	Y	Y	Y	Y	Y
147195	Y	Y	Y	Y	Y	Y
<b>% Compliance</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

**\*IDU Rate = 0/10 = 0%**

# DEDER GENERAL HOSPITAL

## SUSTAINING IMPROVEMENT IN REDUCING IRRATIONAL DRUG USE (IDU):

### A QUALITY IMPROVEMENT PROJECT


#### Monthly Audit & Feedback Session


**Facilitator:** Abdi Tofik


**Attendees:** Medical Director, Senior Physicians, Pharmacists, HSQU Team (12 participants)

S. N	Name(s)	Profession/Position	Responsibility	Signature
1.	Dr.Taju Abdi	GYN/OBS Specialist	Team leader	
2.	Abdella M/d	Midwifery	Secretory	
3.	Dr. Anwar Sham	Gynecology & Obstetrics	Co-leader	
4.	Abdi Tofik	MPH-Quality Director	Facilitator	
5.	Nuredin Yigezu	MPH- CEO	Member	
6.	Dr. Derese Gosa	MD- Medical Director	Member	
7.	Rudwan Sharafuddin	BSPHarm	Member	
8.	Beyan Abdo	Gynecology & Obstetrics	Member	
9.	Balisa Usmail	Pharmacy Head	Members	
10.	Ibsa Shamil	Clinical Pharmacy	Members	
11.	Naima Abdo	Midwifery	Member	
12.	Tsion Tolosa	Midwifery	Member	

#### Feedback Discussion Summary:

 **Positive Findings:** EDL implementation successful, high prescriber satisfaction, perfect compliance achieved.

 **Case Review:** No non-compliant cases.

 **Prescriber Feedback:** EDL very helpful, visual reminders effective.

#### Action Plan:

- Add "Antibiotics NOT for diarrhea" to visual reminders as a preventive measure.
- Conduct patient education on rational drug use.
- Continue weekly EDL distribution.