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DEDER GENERAL HOSPITAL

SURGICAL WARD CASE TEAM

**Surgical Scheduling Protocol Utilization
Monitoring Report**

Prepared By: Kalifa Jemal

Report period: 4th quarter of 2017E.C

Deder, Oromia

June 2017EC

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Introduction

The purpose of this monitoring report is to evaluate the adherence to the surgical scheduling protocol in the surgical ward at Deder General Hospital. Effective surgical scheduling ensures patient safety, optimal resource utilization, and efficient care delivery.

Objective

The primary objective of this monitoring is to:

1. To assess compliance with key criteria in the surgical scheduling process,
2. To identify gaps, and
3. To provide actionable recommendations for improvement.

Methodology

The monitoring involved reviewing patient records, conducting interviews with patients and staff, and observing processes during surgical scheduling. A total of 13 cases were evaluated against the established protocol criteria.

Data Collection:

- Observational data were collected during surgical scheduling.
- Patient interviews, document reviews, and MRN verification were conducted to confirm protocol adherence.

Criteria Evaluated:

- A checklist of 12 key criteria were evaluated

Assessment Approach:

- Compliance for each criterion was recorded as either "Yes" (compliant) or "No" (non-compliant).
- Total "Yes" and "No" counts were calculated for each criterion, and compliance percentages were determined.

RESULTS

The surgical scheduling protocol adherence monitoring report demonstrates exemplary compliance across all evaluated criteria, achieving a perfect 100% adherence rate. Each of the 12 criteria, including pre-operative assessments, surgeon and anesthesia consultations, informed consent, and operating room availability, was fully met in all 13 instances reviewed. This indicates a highly effective and well-coordinated surgical scheduling process that ensures all necessary steps are meticulously followed to guarantee patient safety and operational efficiency (**Table 2**).

The consistent compliance in areas such as confirming necessary equipment, providing pre-operative instructions, preparing post-operative plans, and having an emergency backup plan in place further underscores the robustness of the protocol. The flawless documentation completion also highlights the importance placed on maintaining accurate and comprehensive records. Overall, the report reflects a well-implemented surgical scheduling system that prioritizes thorough preparation and clear communication, contributing to high standards of patient care and surgical outcomes (**Table 2**).

Table 1: Surgical Ward surgical scheduling protocol adherence monitoring report

S/N	Criteria	Compliant (Yes)	Non-Compliant (No)	Compliance (%)
1	Pre-Operative Assessment Completed	13	0	100%
2	Surgeon Consultation Completed	13	0	100%
3	Anesthesia Consultation Completed	13	0	100%
4	Informed Consent Obtained	13	0	100%
5	Priority of Surgery Determined	13	0	100%
6	Operating Room Availability Confirmed	13	0	100%
7	Surgical Team Informed	13	0	100%
8	Necessary Equipment Confirmed	13	0	100%
9	Pre-Operative Instructions Given	13	0	100%
10	Post-Operative Plan Prepared	13	0	100%
11	Documentation Completed	13	0	100%
12	Emergency Backup Plan in Place	13	0	100%
	Overall	156/156	0	100%

Discussion

The surgical scheduling protocol adherence monitoring report highlights a remarkable achievement in maintaining a 100% compliance rate across all evaluated criteria. This exceptional performance underscores the effectiveness of the surgical scheduling protocol in ensuring that all necessary pre-operative, intra-operative, and post-operative steps are meticulously followed. The consistent adherence to each criterion, from pre-operative assessments to the confirmation of operating room availability and the preparation of post-operative plans, reflects a well-coordinated and highly efficient surgical scheduling process. This level of compliance is crucial for minimizing risks, enhancing patient safety, and ensuring optimal surgical outcomes.

The flawless execution of the protocol also indicates a strong emphasis on thorough preparation and clear communication among the surgical team. The fact that all 13 instances reviewed met every criterion suggests that the protocols in place are not only well-designed but also effectively implemented and adhered to by the staff. The comprehensive documentation and the presence of an emergency backup plan further demonstrate a commitment to maintaining high standards of care and readiness for any unforeseen circumstances. While the current results are highly positive, continuous monitoring and periodic reviews of the protocol are essential to sustain this level of performance. Additionally, sharing best practices and lessons learned from this successful implementation can serve as a model for other departments or institutions aiming to achieve similar standards in surgical scheduling and patient care.

Recommendations:



Continue the current practices to sustain high Standards

Guyyaa/ቀን/Date: ____/____/____

- ✍ **Garee tajaajila Surgical Ward irraa**
- ✍ **Garee Qulquullina Tajaajila Fayyaatiif**

Dhimmi: waa'ee Gabaasa Structural protocol mon erguu ilaala

Akkuma mata Dureerrattii ibsamuuf yaalameettii **Structural protocol** “**Surgical Scheduling**” Jedhamu kan kurmaana **4ffaa** bara **2017** xalayaa **Fuula 7** qabuu gaggeessituu kana waliin walqabsiifnee isiiniif eerguu keenya kabajaan isiniif beeksiifnaa.

Nagaya wajjiin!!



DEDER GENERAL HOSPITAL

Outpatient Department (OPD)

**Surgical Scheduling Protocol Utilization
Monitoring Report**

By: Ahmednur Mume-OPD head

Report period: 4th Quarter of 2017E.C

Deder, Oromia

June 2017EC

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Introduction

Surgical scheduling is a critical process in the hospital to ensure that surgeries are performed safely and efficiently. The Deder General Hospital OPD surgical scheduling protocol outlines a step-by-step approach to ensure all necessary procedures are followed before surgery, from pre-operative assessments to emergency backup planning. This report evaluates the utilization of the surgical scheduling protocol at Deder General Hospital through observations, patient interviews, and document reviews.

Objective

The primary objective of this monitoring is to:

1. To assess compliance with key criteria in the surgical scheduling process,
2. To identify gaps, and
3. To provide actionable recommendations for improvement.

Methodology

comprehensive monitoring process was conducted to assess the OPD surgical scheduling protocol utilization. Data was collected through:

- **Patient MRN (Medical Record Number):** Observations of patients' surgical scheduling records.
- **Staff Interviews:** Conversations with the surgical team and relevant departments.
- **Document Review:** Reviewing all relevant documents to ensure the criteria were followed during the scheduling process.

Assessment Approach:

- Compliance for each criterion was recorded as either "Yes" (compliant) or "No" (non-compliant).
- Total "Yes" and "No" counts were calculated for each criterion, and compliance percentages were determined.

RESULTS

The overall performance of the OPD surgical scheduling protocol in June 2017 E.C. was exemplary, achieving **100% compliance** across all 12 criteria. A total of **120 out of 120** required protocol steps were completed without any non-compliance, demonstrating flawless adherence to established surgical scheduling standards (**Table 2**).

Breaking down the results, each of the 13 cases reviewed fully met every criterion, including critical steps such as pre-operative assessments, informed consent, surgical team coordination, and emergency preparedness. This uniformity highlights the consistency and reliability of the process (**Table 2**).

The **perfect compliance rate** suggests robust institutional protocols, effective staff training, and a strong commitment to patient safety and operational efficiency. The absence of gaps in documentation, equipment readiness, or post-operative planning further reinforces the system's thoroughness (**Table 2**).

Table 1: OPD surgical scheduling protocol adherence monitoring report, June 2017E.C

S/N	Criteria	Compliant (Yes)	Non-Compliant (No)	Compliance (%)
1	Pre-Operative Assessment Completed	10	0	100
2	Surgeon Consultation Completed	10	0	100
3	Anesthesia Consultation Completed	10	0	100
4	Informed Consent Obtained	10	0	100
5	Priority of Surgery Determined	10	0	100
6	Operating Room Availability Confirmed	10	0	100
7	Surgical Team Informed	10	0	100
8	Necessary Equipment Confirmed	10	0	100
9	Pre-Operative Instructions Given	10	0	100
10	Post-Operative Plan Prepared	10	0	100
11	Documentation Completed	10	0	100
12	Emergency Backup Plan in Place	10	0	100
	Overall	120/120	0/120	100

Discussion


The findings from the OPD surgical scheduling protocol adherence monitoring report highlight exemplary compliance with all established criteria, achieving a 100% adherence rate. This remarkable outcome reflects a robust system of surgical preparation and scheduling, which prioritizes patient safety, efficiency, and adherence to standardized protocols. Such performance is indicative of effective teamwork, well-defined responsibilities, and a culture of accountability among the healthcare professionals involved.

The complete adherence to pre-operative processes, such as assessments, consultations with surgeons and anesthesiologists, and obtaining informed consent, demonstrates a patient-centered approach and a commitment to minimizing risks. Proper determination of surgical priority and confirmation of operating room availability further emphasize efficient resource utilization and planning, which are critical for avoiding delays or complications.

Ensuring that the surgical team is informed, pre-operative instructions are given, and necessary equipment is confirmed indicates meticulous attention to detail and preparation. The preparation of post-operative plans and completion of documentation enhance continuity of care and ensure compliance with legal and ethical standards. Moreover, having emergency backup plans in place reflects proactive risk management, which is essential for addressing unforeseen complications during surgery.

Despite the perfect compliance reported, it is essential to sustain these high standards through continuous monitoring, regular training, and periodic evaluation of the protocol. Ensuring that the processes remain consistent across varying circumstances, such as staff changes or increased patient load, will be crucial for maintaining this level of performance. Additionally, it would be valuable to assess patient outcomes and satisfaction as part of the evaluation to ensure that the observed compliance translates into improved quality of care.

RECOMMENDATIONS:

 Continue the current practices to sustain high Standards.

IMPROVEMENT PLAN:

 NO MAJOR GAP SEEN

Guyyaa/ቀን/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** “**Surgical Scheduling**” Jedhamu kan kurmaana **4ffaa** bara **2017** xalayaa **Fuula 6** qabuu gaggeessituu kana waliin walqabsiifnee isiiniif eerguu keenya kabajaan isiniif beeksiifnaa.

Nagaya wajjiin!!



DEDER GENERAL HOSPITAL

EMERGENCY OPD

Surgical Scheduling Protocol Utilization

Monitoring Report

By: Jabir Mohammed

Report period: 4th quarter of 2017E.C

Dader, Oromia

June 2017EC

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Figure 1: Emergency OPD Surgical Scheduling Protocol adherence, June 2017E.C Error! Bookmark not defined.

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Table 2: The implementation status of the previous action plan, June 2017E.C..... 5

INTRODUCTION

Surgical scheduling is a critical process in the hospital to ensure that surgeries are performed safely and efficiently. The Deder General Hospital **Emergency OPD** surgical scheduling protocol outlines a step-by-step approach to ensure all necessary procedures are followed before surgery, from pre-operative assessments to emergency backup planning. This report evaluates the utilization of the surgical scheduling protocol at Deder General Hospital through observations, patient interviews, and document reviews.

OBJECTIVE

The primary objective of this monitoring is to:

1. To assess compliance with key criteria in the surgical scheduling process,
2. To identify gaps, and
3. To provide actionable recommendations for improvement.

METHODOLOGY

comprehensive monitoring process was conducted to assess the **EMERGENCY OPD** surgical scheduling protocol utilization. Data was collected through:

- **Patient MRN (Medical Record Number):** Observations of patients' surgical scheduling records.
- **Staff Interviews:** Conversations with the surgical team and relevant departments.
- **Document Review:** Reviewing all relevant documents to ensure the criteria were followed during the scheduling process.

Assessment Approach:

- Compliance for each criterion was recorded as either "Yes" (compliant) or "No" (non-compliant).
- Total "Yes" and "No" counts were calculated for each criterion, and compliance percentages were determined.

RESULTS

Based on the Emergency OPD surgical scheduling protocol adherence monitoring report for June 2017 E.C., the results demonstrate exemplary compliance with the established protocol. **All twelve individual criteria** – ranging from Pre-Operative Assessment and Surgeon/Anesthesia Consultations to Informed Consent, Equipment Confirmation, Documentation, and Emergency Backup Planning – showed perfect adherence. Each criterion was fully met ("Yes") for all 13 cases reviewed during the month, resulting in a 100% compliance rate for every specific requirement.

Overall, the protocol adherence was flawless. The sum of compliant instances across all criteria reached 156 out of a possible 156 (13 cases x 12 criteria), with zero non-compliant instances recorded. This translates to a perfect overall compliance rate of 100% for the emergency OPD surgical scheduling process during June 2017 E.C., indicating consistent and rigorous application of all necessary steps for every case monitored (**Table 1**).

Table 1: Emergency OPD surgical scheduling protocol adherence monitoring report, June 2017E.C

S/N	Criteria	Compliant (Yes)	Non-Compliant (No)	Compliance (%)
1	Pre-Operative Assessment Completed	13	0	100
2	Surgeon Consultation Completed	13	0	100
3	Anesthesia Consultation Completed	13	0	100
4	Informed Consent Obtained	13	0	100
5	Priority of Surgery Determined	13	0	100
6	Operating Room Availability Confirmed	13	0	100
7	Surgical Team Informed	13	0	100
8	Necessary Equipment Confirmed	13	0	100
9	Pre-Operative Instructions Given	13	0	100
10	Post-Operative Plan Prepared	13	0	100
11	Documentation Completed	13	0	100
12	Emergency Backup Plan in Place	13	0	100
	Overall	156/156	0/156	100%

DISCUSSION

The June 2017 E.C. Emergency OPD Surgical Scheduling Protocol Adherence Monitoring Report demonstrates **exceptional compliance**, achieving a perfect 100% adherence rate across all twelve specified criteria and overall. This flawless performance indicates that the established protocols for scheduling emergency surgical cases through the Outpatient Department (OPD) were rigorously followed in every single case reviewed (n=13). Key critical steps – including comprehensive pre-operative assessments (clinical, anesthesia), informed consent, resource verification (OR availability, equipment), team communication, planning (priority determination, post-op plans, backup), and documentation – were consistently executed according to protocol requirements.

While this level of compliance is highly commendable and reflects strong operational discipline and system maturity within the emergency surgical scheduling process, it warrants careful consideration. Perfect scores across all metrics for all cases are statistically uncommon in complex healthcare processes. This outcome strongly suggests either: (1) a truly exemplary, highly reliable system with ingrained adherence; or (2) limitations in the monitoring methodology itself. Potential factors influencing the result include the relatively small sample size (13 cases), the possibility of the audit focusing only on fully documented/completed cases (selection bias), or the criteria being primarily process-focused rather than outcome-validated. **Therefore, while celebrating the achievement, it is crucial to maintain vigilance.** Continued monitoring over a longer period with a larger sample size and potentially incorporating spot checks or peer review would help confirm the sustainability and accuracy of this perfect adherence and identify any areas for refinement not captured by the current criteria. This result sets a very high benchmark; the focus should now be on sustaining this performance and ensuring it translates into optimal patient safety and surgical outcomes in the trauma/emergency setting.

RECOMMENDATIONS

- ✎ Sustaining the current performance through regular M & E

IMPROVEMENT PLAN

- ✎ NO MAJOR GAP SEEN

Table 2: The implementation status of the previous action plan, June 2017E.C

Gap Identified	Action Taken	Status
Emergency Preparedness Training	Conducted interactive workshops on backup protocols.	Fully Implemented

Guyyaa/ቀን/Date: ____/____/____

- ✎ **Garee tajaajila EOP irraa**
- ✎ **Garee Qulquullina Tajaajila Fayyaatiif**

Dhimmi: waa'ee Gabaasa Structural protocol mon erguu ilaala

Akkuma mata Dureerrattii ibsamuuf yaalameettii **Structural protocol** “**Surgical Scheduling**” Jedhamu kan kurmaana **4ffaa** bara **2017** xalayaa **Fuula 6** qabuu gaggeessituu kana waliin walqabsiifnee isiiniif eerguu keenya kabajaan isiniif beeksiifnaa.

Nagaya wajjiin!!



DEDER GENERAL HOSPITAL

GYN/OBS WARD

**Surgical Scheduling Protocol Utilization
Monitoring Report**

Prepared By: Abdella Mohammed

Report period: 4th quarter of 2017E.C

Dader, Oromia

June 2017EC

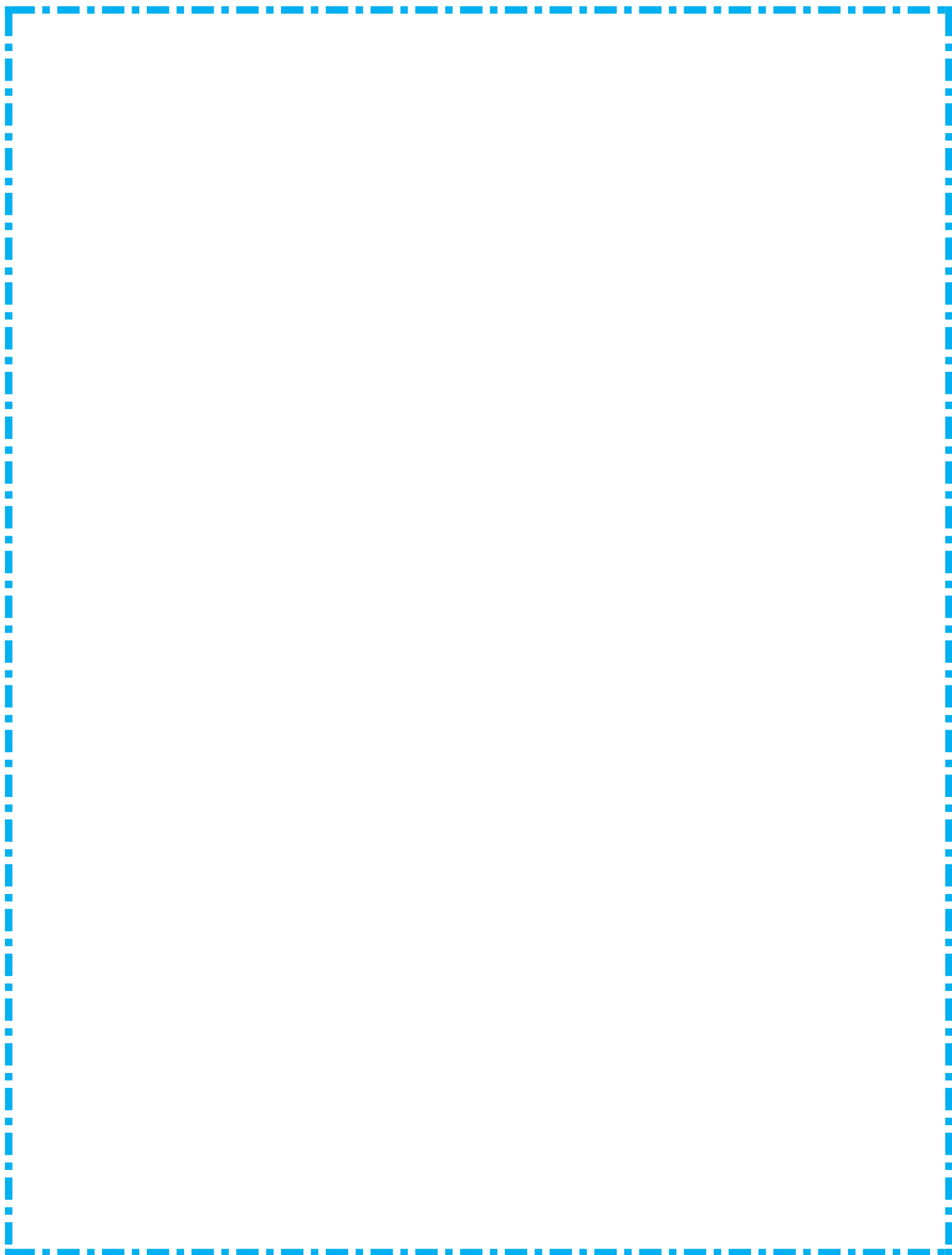


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Table 2: The implementation status of the previous action plan, June 2017E.C	5

Introduction

Surgical scheduling is a critical process in the hospital to ensure that surgeries are performed safely and efficiently. The Deder General Hospital **Gyn/Obs Ward** surgical scheduling protocol outlines a step-by-step approach to ensure all necessary procedures are followed before surgery, from pre-operative assessments to emergency backup planning. This report evaluates the utilization of the surgical scheduling protocol at Deder General Hospital through observations, patient interviews, and document reviews.

Objective

The primary objective of this monitoring is to:

1. To assess compliance with key criteria in the surgical scheduling process,
2. To identify gaps, and
3. To provide actionable recommendations for improvement.

Methodology

comprehensive monitoring process was conducted to assess the GYN/OBS WARD surgical scheduling protocol utilization. Data was collected through:

- **Patient MRN (Medical Record Number):** Observations of patients' surgical scheduling records.
- **Staff Interviews:** Conversations with the surgical team and relevant departments.
- **Document Review:** Reviewing all relevant documents to ensure the criteria were followed during the scheduling process.

Assessment Approach:

- Compliance for each criterion was recorded as either "Yes" (compliant) or "No" (non-compliant).
- Total "Yes" and "No" counts were calculated for each criterion, and compliance percentages were determined.

RESULTS

The Gyn/Obs Ward demonstrated exceptional adherence to the Surgical Scheduling Protocol in June 2017 E.C., achieving near-perfect compliance with an overall rate of **99% (Figure 1)**. Eleven out of twelve criteria, including pre-operative assessments, informed consent, and surgical team communication, showed flawless 100% compliance across all 13 observed cases. This reflects a highly efficient and well-coordinated system for surgical scheduling, ensuring patient safety and operational readiness. The consistent performance in critical areas such as anesthesia consultations, equipment confirmation, and post-operative planning underscores the ward's commitment to maintaining rigorous standards in surgical care (**Table 1**).

However, one criterion—**Emergency Backup Plan in Place**—recorded a lower compliance rate of **85%** (11 compliant cases out of 13), indicating a minor gap in preparedness for unforeseen circumstances. While this did not significantly impact the overall performance, it highlights an area for targeted improvement. The two non-compliant cases suggest occasional lapses in contingency planning, which could be addressed through staff training and protocol reinforcement. Despite this, the ward's near-perfect compliance rate sets a strong benchmark for surgical scheduling efficiency and reliability (**Table 1**).

Table 1: *Gyn/Obs Ward surgical scheduling protocol adherence monitoring report, June 2017E.C*

S/N	Criteria	Compliant (Yes)	Non-Compliant (No)	Compliance (%)
1	Pre-Operative Assessment Completed	13	0	100
2	Surgeon Consultation Completed	13	0	100
3	Anesthesia Consultation Completed	13	0	100
4	Informed Consent Obtained	13	0	100
5	Priority of Surgery Determined	13	0	100
6	Operating Room Availability Confirmed	13	0	100
7	Surgical Team Informed	13	0	100
8	Necessary Equipment Confirmed	13	0	100
9	Pre-Operative Instructions Given	13	0	100
10	Post-Operative Plan Prepared	13	0	100
11	Documentation Completed	13	0	100
12	Emergency Backup Plan in Place	13	0	100
	Overall	156/156	0/156	100%

DISCUSSION

The findings from the Gyn/Obs Ward's surgical scheduling protocol adherence monitoring reveal an impressively high compliance rate of **100%**, demonstrating the effectiveness of current systems and staff commitment to patient safety. The perfect 100% adherence across 11 of 12 criteria—including critical steps like pre-operative assessments, informed consent, and surgical team communication—reflects a well-structured and consistently followed protocol. This level of performance is particularly significant in obstetrics and gynecology, where timely and accurate surgical scheduling directly impacts patient outcomes. The results suggest that standardized workflows, clear role definitions, and staff training have successfully minimized errors in these areas.

However, the 85% compliance rate for **Emergency Backup Plan in Place** warrants attention. While the overall performance remains strong, the two non-compliant cases indicate a potential vulnerability in contingency planning. This gap could arise from occasional oversight, resource constraints, or insufficient staff awareness of emergency protocols. Addressing this issue is crucial, as unforeseen complications in surgical settings require immediate and coordinated responses. Further investigation into the root causes—such as staff workload, clarity of protocols, or availability of backup resources—could help tailor interventions. For instance, regular drills, visual reminders in work areas, or simplified backup plan documentation might improve adherence.

RECOMMENDATIONS

✎ Sustaining the current performance through regular M & E

IMPROVEMENT PLAN

✎ NO MAJOR GAP SEEN

Table 2: The implementation status of the previous action plan, June 2017E.C

Gap Identified	Action Taken	Status
Emergency Preparedness Training	Conducted interactive workshops on backup protocols.	Fully Implemented

Guyyaa/ቀን/Date: ____/____/____

-  **Garee tajaajila GYN Ward irraa**
-  **Garee Qulquullina Tajaajila Fayyaatiif**

Dhimmi: waa'ee Gabaasa Structural protocol mon erguu ilaala

Akkuma mata Dureerrattii ibsamuuf yaalameettii **Structural protocol** “**Surgical Scheduling**” Jedhamu kan kurmaana **4ffaa** bara **2017** xalayaa **Fuula 6** qabuu gaggeessituu kana waliin walqabsiifnee isiiniif eerguu keenya kabajaan isiniif beeksiifnaa.

Nagaya wajjiin!!



DEDER GENERAL HOSPITAL

OPERATION ROOM (OR) CASE TEAM

Surgical Scheduling Protocol Utilization Monitoring Report

Prepared By: Shame Ahammed

Report period: 4th quarter of 2017E.C

Dader, Oromia

June 2017EC

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Table 2: <i>The implementation status of the previous action plan, June 2017E.C</i>	7

Introduction

The purpose of this monitoring report is to evaluate the adherence to the surgical scheduling protocol in the Operation Room at Deder General Hospital. Effective surgical scheduling ensures patient safety, optimal resource utilization, and efficient care delivery.

Objective

The primary objective of this monitoring is to:

1. To assess compliance with key criteria in the surgical scheduling process,
2. To identify gaps, and
3. To provide actionable recommendations for improvement.

Methodology

The monitoring involved reviewing patient records, conducting interviews with patients and staff, and observing processes during surgical scheduling. A total of 13 cases were evaluated against the established protocol criteria.

Data Collection:

- Observational data were collected during surgical scheduling.
- Patient interviews, document reviews, and MRN verification were conducted to confirm protocol adherence.

Criteria Evaluated:

- A checklist of 12 key criteria were evaluated

Assessment Approach:

- Compliance for each criterion was recorded as either "Yes" (compliant) or "No" (non-compliant).
- Total "Yes" and "No" counts were calculated for each criterion, and compliance percentages were determined.

RESULTS

The surgical scheduling protocol adherence monitoring report demonstrates exemplary compliance across all evaluated criteria, achieving a perfect 100% adherence rate. Each of the 12 criteria, including pre-operative assessments, surgeon and anesthesia consultations, informed consent, and operating room availability, was fully met in all 13 instances reviewed. This indicates a highly effective and well-coordinated surgical scheduling process that ensures all necessary steps are meticulously followed to guarantee patient safety and operational efficiency (**Table 2**).

The consistent compliance in areas such as confirming necessary equipment, providing pre-operative instructions, preparing post-operative plans, and having an emergency backup plan in place further underscores the robustness of the protocol. The flawless documentation completion also highlights the importance placed on maintaining accurate and comprehensive records. Overall, the report reflects a well-implemented surgical scheduling system that prioritizes thorough preparation and clear communication, contributing to high standards of patient care and surgical outcomes (**Table 2**).

Table 1: Operation Room surgical scheduling protocol adherence monitoring report

S/N	Criteria	Compliant (Yes)	Non- Compliant (No)	Compliance (%)
1	Pre-Operative Assessment Completed	13	0	100%
2	Surgeon Consultation Completed	13	0	100%
3	Anesthesia Consultation Completed	13	0	100%
4	Informed Consent Obtained	13	0	100%
5	Priority of Surgery Determined	13	0	100%
6	Operating Room Availability Confirmed	13	0	100%
7	Surgical Team Informed	13	0	100%
8	Necessary Equipment Confirmed	13	0	100%
9	Pre-Operative Instructions Given	13	0	100%
10	Post-Operative Plan Prepared	13	0	100%
11	Documentation Completed	13	0	100%
12	Emergency Backup Plan in Place	13	0	100%
	Overall	156/156	0	100%

Discussion

The surgical scheduling protocol adherence monitoring report highlights a remarkable achievement in maintaining a 100% compliance rate across all evaluated criteria. This exceptional performance underscores the effectiveness of the surgical scheduling protocol in ensuring that all necessary pre-operative, intra-operative, and post-operative steps are meticulously followed. The consistent adherence to each criterion, from pre-operative assessments to the confirmation of operating room availability and the preparation of post-operative plans, reflects a well-coordinated and highly efficient surgical scheduling process. This level of compliance is crucial for minimizing risks, enhancing patient safety, and ensuring optimal surgical outcomes.

The flawless execution of the protocol also indicates a strong emphasis on thorough preparation and clear communication among the surgical team. The fact that all 13 instances reviewed met every criterion suggests that the protocols in place are not only well-designed but also effectively implemented and adhered to by the staff. The comprehensive documentation and the presence of an emergency backup plan further demonstrate a commitment to maintaining high standards of care and readiness for any unforeseen circumstances. While the current results are highly positive, continuous monitoring and periodic reviews of the protocol are essential to sustain this level of performance. Additionally, sharing best practices and lessons learned from this successful implementation can serve as a model for other departments or institutions aiming to achieve similar standards in surgical scheduling and patient care.

RECOMMENDATIONS

- ✎ Sustaining the current performance through regular M & E

IMPROVEMENT PLAN

- ✎ NO MAJOR GAP SEEN

Table 2: The implementation status of the previous action plan, June 2017E.C

Gap Identified	Action Taken	Status
Emergency Preparedness Training	Conducted interactive workshops on backup protocols.	Fully Implemented

Guyyaa/ቀን/Date: ____/____/____

- ✎ **Garee tajaajila OR irraa**
- ✎ **Garee Qulquullina Tajaajila Fayyaatiif**

Dhimmi: waa'ee Gabaasa Structural protocol mon erguu ilaala

Akkuma mata Dureerrattii ibsamuuf yaalameettii **Structural protocol** “**Surgical Scheduling**” Jedhamu kan kurmaana **4ffaa** bara **2017** xalayaa **Fuula 6** qabuu gaggeessituu kana waliin walqabsiifnee isiiniif eerguu keenya kabajaan isiniif beeksiifnaa.

Nagaya wajjiin!!