
DEDER GENERAL HOSPITAL

Patient Transportation Protocol Adherence Monitoring Report

By: Mohammed Aliyi



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1. Introduction

Safe and efficient patient transportation is a critical component of quality care in pediatric settings, ensuring timely interventions while protecting the health, comfort, and dignity of patients. At Deder General Hospital, the **Patient Transportation Protocol** outlines standardized procedures for the safe intra-hospital movement of pediatric patients.

This report presents the findings of a structured monitoring exercise conducted in the Pediatric Ward to assess adherence to the protocol, identify strengths, and uncover areas for targeted improvement.

2. Objectives

The core objectives of this monitoring initiative were to:

1. Evaluate the utilization and compliance with the Patient Transportation Protocol in the Pediatric Ward.
 2. Ensure all pediatric patients are transported in a safe, timely, and coordinated manner consistent with institutional standards.
 3. Identify areas requiring reinforcement or procedural enhancement.
 4. Recommend actionable steps to sustain and improve transport safety and efficiency.
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3. Methodology

3.1 Audit Design

- **Sample Size:** 13 pediatric patient transports were randomly selected for evaluation.
 - **Assessment Tool:** A standardized checklist covering **10 protocol indicators** was used.
 - **Data Collection:**
 - Observational assessments during real-time patient transfers
 - Interviews with transport staff and caregivers
 - Documentation reviews by nurses
 - **Scoring Criteria:** Each indicator was scored:
 - **Yes:** Protocol followed
 - **No:** Protocol not followed
 - **Compliance Rate:** Calculated by dividing the number of compliant scores by total observations (130 total checks).
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4. Results

The overall adherence to the Patient Transportation Protocol during JULY 201 E.C. was **excellent**, with a **compliance rate of 96.9% (126/130)**.

Key Achievements:

- **100% compliance** was achieved in 8 out of 10 protocol categories, including:
 - Proper Patient Identification
 - Clear Communication with the Patient
 - Transport Team Briefing
 - Availability of Necessary Pediatric Equipment
 - Use of Safe Transfer Techniques
 - Patient Monitoring During Transfer
 - Observance of Safety Precautions
 - Infection Control Measures

These results demonstrate a high level of coordination, vigilance, and professionalism among the pediatric care and transport teams.

Areas for Improvement:

- **Minimal Delays in Transport:** 10 out of 13 cases (77%) experienced timely transfer, while 3 experienced minor delays due to logistical or communication issues.
- **Proper Handover:** Achieved in 11 out of 13 cases (85%), with 2 instances lacking full verbal or written exchange between sending and receiving staff.

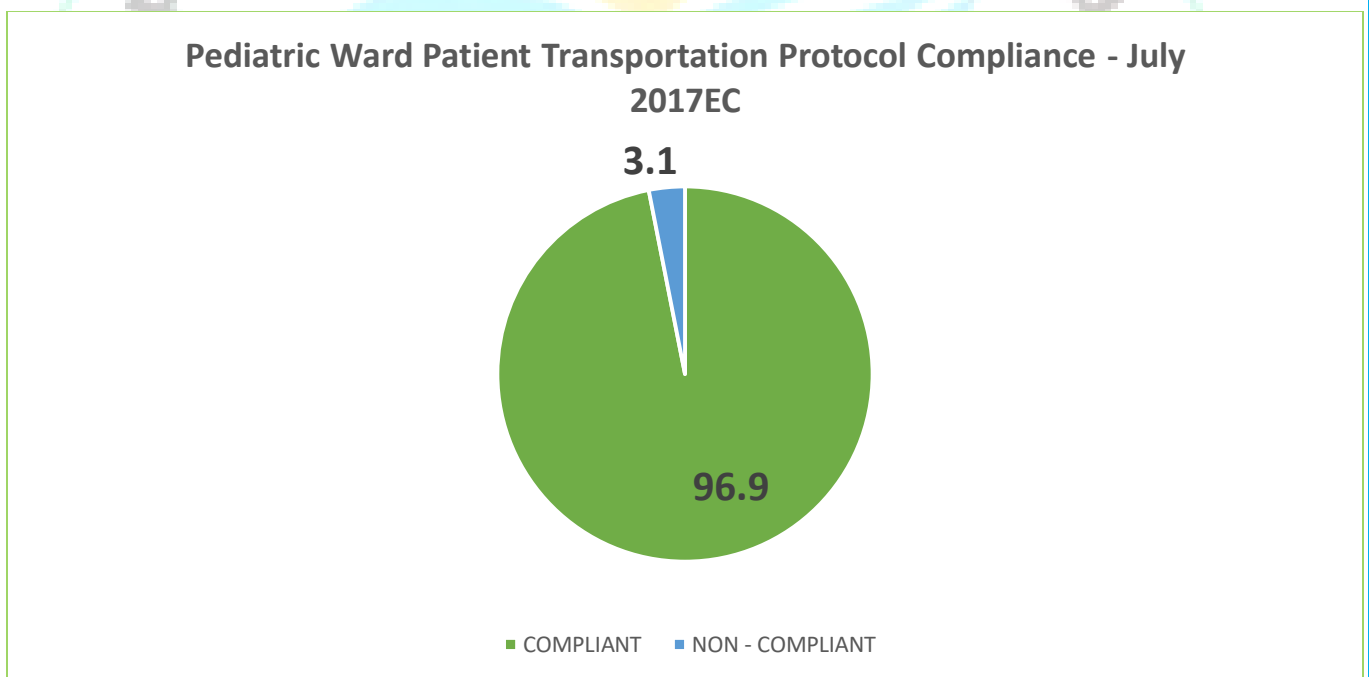
Table 1: Compliance by Transport Protocol Criteria

Criteria	Compliant (Yes)	Non-Compliant (No)	Compliance Rate (%)
Proper Identification	13	0	100%
Clear Communication with Patient	13	0	100%
Transport Team Briefed	13	0	100%
Necessary Pediatric Equipment	13	0	100%
Safe Transfer Techniques Used	13	0	100%
Monitor Patient's Condition	13	0	100%
Safety Precautions Followed	13	0	100%
Infection Control Measures	13	0	100%

Criteria	Compliant (Yes)	Non-Compliant (No)	Compliance Rate (%)
Minimal Delays in Transport	10	3	77%
Proper Handover	11	2	85%
Total	126	4	96.9%

Figure 1: Pediatric Ward Patient Transportation Protocol Compliance – JULY 201 E.C.

(Compliant = 96.9%; Non-Compliant = 3.1%)



5. Discussion

The results of this audit demonstrate **strong protocol adherence** by the Pediatric Ward staff in ensuring the safe and coordinated transfer of pediatric patients. The **perfect compliance in 8 out of 10 protocol areas** reflects effective communication, appropriate use of equipment, safety prioritization, and clear role assignments.

The minor compliance gaps observed in **Minimal Delays in Transport (77%)** and **Proper Handover (85%)** warrant attention:

- **Transport Delays** were mostly attributed to temporary staff unavailability or misalignment of equipment readiness. While delays were short and did not compromise patient safety, efforts should be made to streamline dispatch coordination.
- **Incomplete Handover** in two instances likely resulted from hurried transitions or overlapping shift changes, leading to less structured information exchange. Ensuring that every transfer concludes with a **clear, concise, and standardized handover** will help maintain continuity of care.

6. Recommendations

To address the observed performance gaps and further strengthen overall transport safety, the following recommendations are proposed:

1. **Enhance Handover Protocol**
 - Implement a **standardized handover form or SBAR tool** (Situation, Background, Assessment, Recommendation).
 - Require verbal handoff confirmation before patient release.
2. **Reduce Delays in Transport**
 - Introduce a **transport readiness checklist** for quicker preparation.
 - Improve real-time communication between wards, porters, and equipment handlers.
3. **Sustain Protocol Adherence in High-Performing Areas**
 - Conduct **monthly feedback sessions** recognizing successful teams.
 - Include transportation protocol performance in **quarterly ward reviews**.

Table 2: Action Plan – Improvement Areas

Area of Concern	Proposed Action	Responsible Team	Timeline
Proper Handover	Utilizing handover communication and documentation tools	Ward Heads, QI Team	Always
Delays in Transport	Review transport dispatch flow and apply readiness checklists	Nursing Supervisors, Porters	Immediately
Ongoing Protocol Monitoring	Conduct monthly audits with real-time feedback to staff	Quality Improvement Unit	Ongoing

7. Review of Previous Improvement Plan

Area for Improvement	Action Taken	Status
Transport Team Briefing	Formalized checklist introduced	Fully Implemented
Pediatric Equipment Availability	Equipment checklist adopted	Fully Implemented
Safety Measures	Quarterly training introduced	In Progress
Infection Prevention	Integrated into all transport protocols	Fully Implemented
Monitoring and Feedback	Monthly QI reviews launched	Ongoing

8. Conclusion

The audit findings affirm that Deder General Hospital's Pediatric Ward maintains a **high standard of patient transport safety and efficiency**, with a **96.9% overall protocol adherence rate**. The team has shown commendable performance in core areas of identification, infection control, equipment use, and communication.

To achieve **complete protocol compliance**, minor refinements in handover procedures and transport scheduling should be prioritized. Through structured interventions and continued monitoring, the Pediatric Ward can confidently progress toward **100% compliance**, ensuring optimal safety and care during every patient movement.