



DEDER GENERAL HOSPITAL

Emergency Department

Round Protocol Utilization Monitoring Report

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Report period: 4th quarter of 2017E.C

Deder, Oromia

June 2017EC

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BACKGROUND

This report outlines the utilization of the Emergency Department round protocol at Deder General Hospital. The purpose of this monitoring exercise is to assess the compliance of the pediatric care team with the established protocol during their daily rounds. The monitoring focuses on key aspects of patient care, communication, and teamwork, as outlined in the pediatric round criteria.

AIM

The overall aim of this audit is to ensure that **Deder General Hospital** staffs have a working knowledge and adherence to patients' round protocol

OBJECTIVE

- To assess all **case team** are aware of the protocol
- To identify areas for improvement in relation to the utilization of the protocol
- To Develop and implement action plan on identified gaps

Table 1: Criteria and standards

Indicators	Verification Compliant (Y/N)
Scheduled Rounds on Time	
Multidisciplinary Team Participation	
Patient Assessment Completed	
Communication with Patient/Family	
Care Plan Updated	
Medication and Treatment Orders Reviewed	
Follow-Up Tasks Assigned	
Documentation Completed	
Patient Safety Measures Discussed	
Clear Role Assignment	
Specialist Consultations Arranged	
Discharge Planning Discussed	

METHODS

- ☛ Structured audit tool is used to collect the data

- ☛ Data was collected by patients and staff interview

Study Period

- ☛ Entire 2nd quarter of 2017

Sample size

- ☛ Total sample size was 13

Audit frequency

- ☛ Quarterly

RESULTS

The Emergency Department demonstrated exceptional adherence to its Round protocol in June 2017EC, achieving **perfect 100% overall compliance**. This outstanding result is reflected in the total score of 156 out of a possible 156 compliance points across all 12 monitored criteria and all 13 rounds conducted during the month. Not a single instance of non-compliance was recorded for any criterion during any round.

This flawless overall performance was underpinned by consistent adherence across every individual criterion. All 12 specific requirements of the protocol, including timely conduct of rounds, multidisciplinary team participation, comprehensive patient assessment, communication, care plan updates, medication reviews, task assignment, documentation, safety discussions, role clarity, specialist consultation arrangements, and discharge planning, were met successfully in each of the 13 rounds monitored. This indicates a highly effective and uniformly implemented rounding process within the Emergency Department for the reporting period.

Table 2: EOPD Department Round protocol adherence monitoring performance, June 2017EC

S/N	Round Criteria	Compliant (Y)	Compliant (N)	Total Performance (%)
1	Scheduled Rounds Conducted on Time	13	0	100
2	Multidisciplinary Team Participation	13	0	100
3	Patient Assessment Completed	13	0	100
4	Communication with Patient and Family	13	0	100
5	Care Plan Updated	13	0	100
6	Medication and Treatment Orders Reviewed	13	0	100
7	Follow-Up Tasks Assigned	13	0	100
8	Documentation Completed	13	0	100
9	Patient Safety Measures Discussed	13	0	100
10	Clear Role Assignment During Rounds	13	0	100
11	Specialist Consultations Arranged (If Needed)	13	0	100
12	Patient Discharge Planning Discussed (If Applicable)	13	0	100
	Overall Compliance	156/156	0/1156	100%

DISCUSSION

The data presented for June 2017EC reveals an exceptional level of adherence to the Emergency Department Round protocol, achieving **100% compliance across all 12 monitored criteria for all 13 rounds conducted**. This perfect score signifies a remarkably high standard of operational discipline and process execution within the ED during the reporting period. It suggests that the multidisciplinary rounds were consistently conducted on schedule, involved the appropriate team members, and comprehensively addressed all critical aspects of patient care, including assessment, communication, care planning, medication review, safety, task assignment, documentation, and discharge planning. This level of uniformity indicates that the protocol is well-understood, effectively implemented, and rigorously followed by the ED team, potentially contributing significantly to patient safety, care coordination, and overall departmental efficiency.

While the achievement of 100% compliance is highly commendable, it warrants careful consideration. Such perfect results, while desirable, are uncommon in complex clinical environments like the ED. It is crucial to ensure that the monitoring process itself is robust and captures a true reflection of practice. Potential factors contributing to this outcome include exceptionally strong leadership, ingrained quality culture, effective training, or potentially a monitoring system focused primarily on documentation completeness rather than direct observation of practice depth. The absence of any non-compliance ("Compliant (N)" = 0 for all criteria) suggests either flawless execution or limitations in the measurement's ability to detect minor deviations or assess qualitative aspects like communication effectiveness or patient understanding. To sustain this high performance and validate its depth, future monitoring might consider incorporating random audits, direct observation, or patient/family feedback alongside documentation review. Continuous focus on maintaining this standard, identifying potential areas for qualitative improvement even within compliant processes, and ensuring the monitoring remains sensitive to detect any emerging issues will be essential moving forward.

RECOMMENDATIONS

- ☒ Maintain current performance by regular M&E

Table 3: Implementation Status of previous performance improvement Plan, June 2017EC

Area for Improvement	Implementation Status	Key Outcomes
Specialist Consultations	Fully Implemented	Dedicated tracking system established by ED team
Patient Safety Measures	Partially Implemented	Monthly audits initiated but inconsistent documentation



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

Dhimmi: waa'ee Gabaasa Structural protocol mon erguu ilaala

Akkuma mata Dureerrattii ibsamuuf yaalameettii Structural protocol “**Round protocol**” Jedhamu kan kurmaana **4ffaa_bar** 2017 xalayaa **Fuula 8** qabuu gaggeessituu kana waliin walqabsiifnee isiiniif eerguu keenya kabajaan isiniif beeksiifnaa.

Nagaya wajiin!!