

# **DEDER GENERAL HOSPITAL**

## **Emergency Department**

### **ROUND PROTOCOL UTILIZATION MONITORING REPORT**

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**Department:** Emergency Department (ED)

**Reporting Period:** 4th Quarter of 2017 E.C.



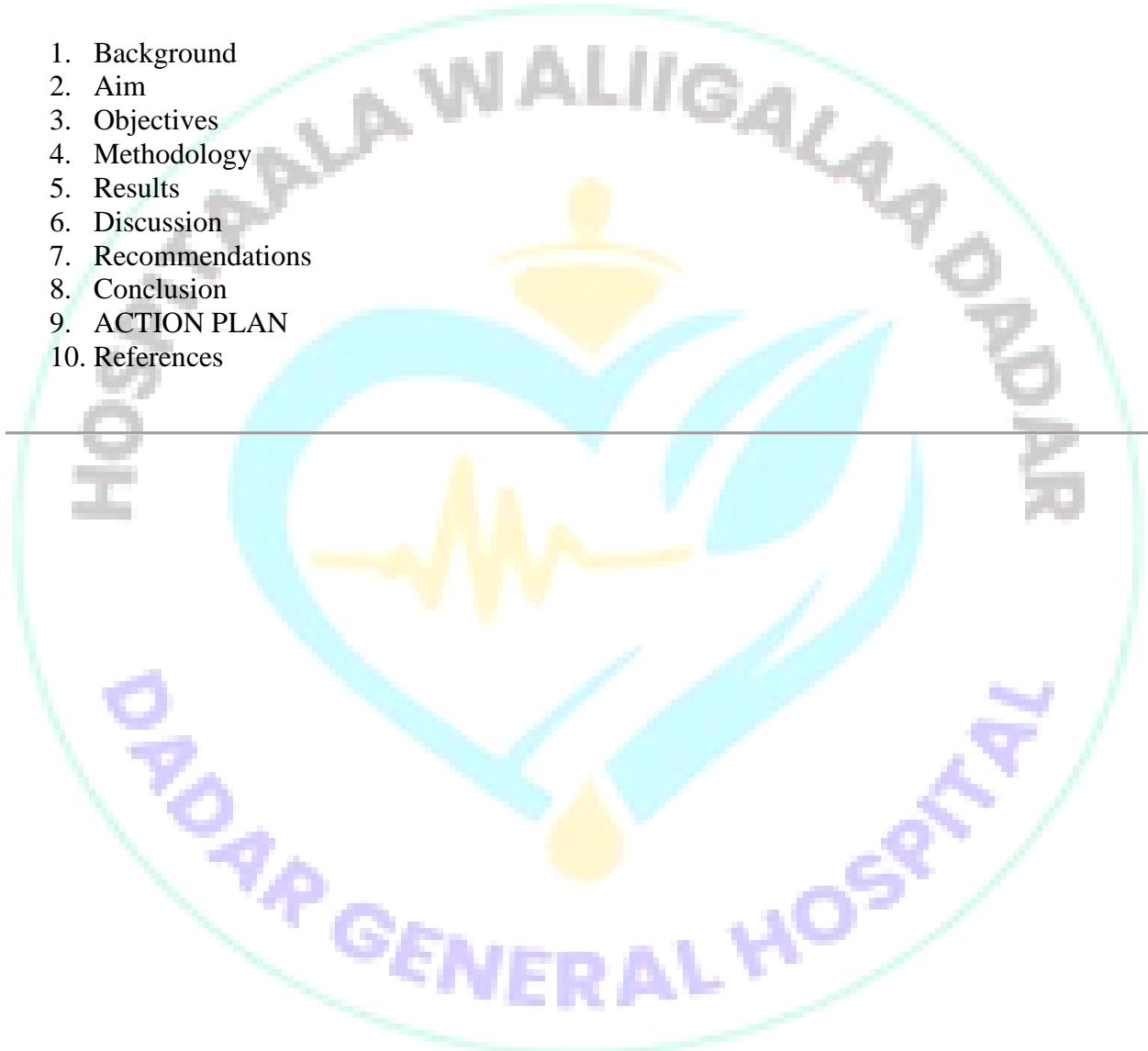
**Location:** Deder, Oromia, Ethiopia

**Date:** July 2017 E.C.

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## Table of Contents

1. Background
  2. Aim
  3. Objectives
  4. Methodology
  5. Results
  6. Discussion
  7. Recommendations
  8. Conclusion
  9. ACTION PLAN
  10. References
- 



# **1. Background**

Rounding protocols are a cornerstone of effective emergency care, ensuring structured communication, coordinated decision-making, and timely interventions. At Deder General Hospital's Emergency Department, the application of a standardized rounding protocol is vital in optimizing patient care, facilitating multidisciplinary collaboration, and improving health outcomes. This report presents findings from a protocol adherence audit conducted in July 2017 E.C., with a focus on evaluating the consistency and completeness of round practices.

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## **2. Aim**

To verify that all emergency department personnel strictly follow the established rounding protocol, ensuring thorough, efficient, and high-quality clinical care delivery.

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## **3. Objectives**

- To determine the level of adherence to each component of the Emergency Department rounding protocol.
- To validate that all elements of the protocol are fully implemented in daily practice.
- To maintain high standards of patient care and effective teamwork through continuous monitoring.
- To reinforce a culture of excellence and accountability in patient management.

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## **4. Methodology**

### **4.1 Study Design**

A cross-sectional audit using a standardized compliance checklist.

### **4.2 Audit Period**

(4th Quarter of 2017 E.C.)

### **4.3 Sample Size**

Ten (10) patient records were selected randomly and evaluated for complete adherence to the round protocol.

#### 4.4 Data Collection Methods

- **Chart Review:** Evaluated the quality and completeness of documentation and care decisions.
- **Direct Observation:** Assessed team participation, communication, and workflow.
- **Staff Interviews:** Gathered insights on awareness and execution of the rounding protocol.
- **Checklist Scoring:** Each protocol criterion was scored as either compliant (Yes = 1) or non-compliant (No = 0).

### 5. Results

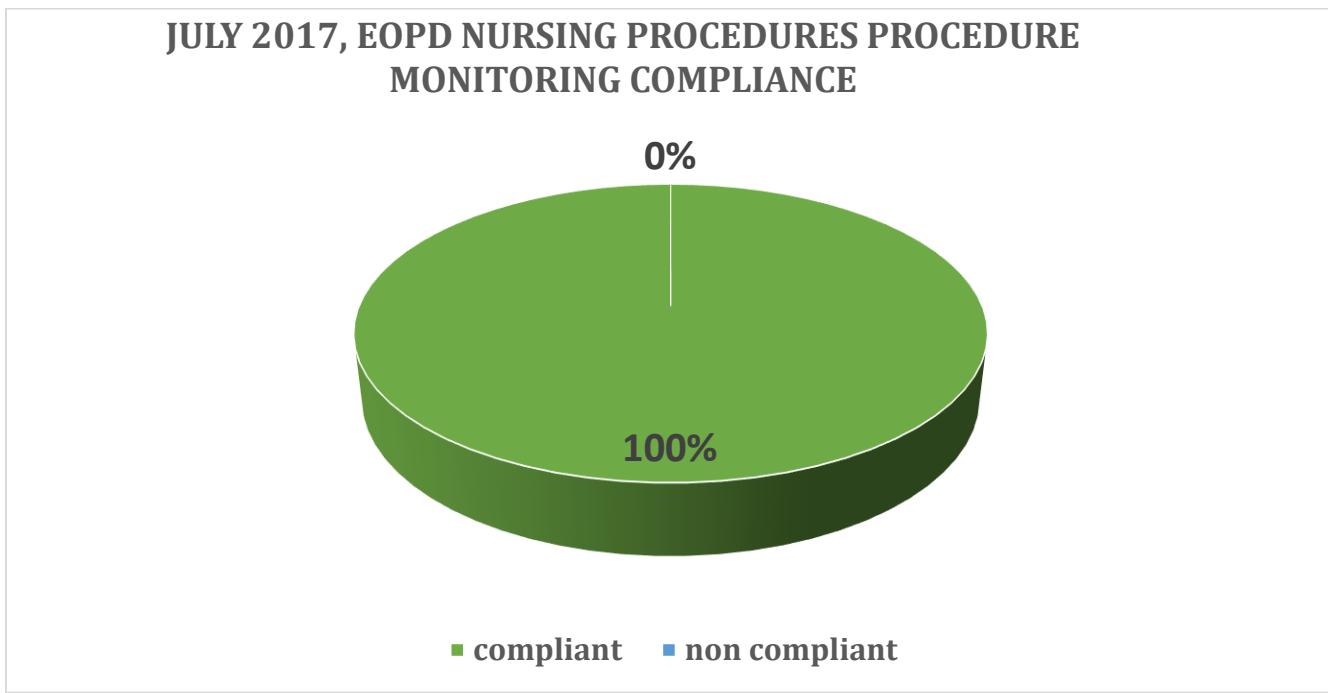
The assessment revealed **100% compliance** across all measured criteria for every patient chart reviewed. This indicates full adherence to the Emergency Department rounding protocol.

**Table 1: Emergency Department Round Protocol Adherence – July 2017 E.C.**

S/N	Round Criteria	Compliant (Yes)	Non-Compliant (No)	Compliance (%)
1	Scheduled Rounds Conducted on Time	10	0	100%
2	Multidisciplinary Team Participation	10	0	100%
3	Patient Assessment Completed	10	0	100%
4	Communication with Patient and Family	10	0	100%
5	Care Plan Updated	10	0	100%
6	Medication and Treatment Orders Reviewed	10	0	100%
7	Follow-Up Tasks Assigned	10	0	100%
8	Documentation Completed	10	0	100%
9	Patient Safety Measures Discussed	10	0	100%
10	Clear Role Assignment During Rounds	10	0	100%
11	Specialist Consultations Arranged (If Needed)	10	0	100%
12	Patient Discharge Planning Discussed (If Applicable)	10	0	100%

**Total Compliance:** 120/120 → 100%

PIECHART: ROUND PROTOCOL ADHERENCE EOPD, JULY, 2017EC



## 6. Discussion

The findings of this monitoring exercise highlight exemplary performance by the Emergency Department team in adhering to the hospital's round protocol. Full compliance across all parameters demonstrates a robust and well-integrated system of care delivery.

Key strengths observed include:

- Consistent multidisciplinary involvement.
- Timely and structured rounds.
- Clear communication with patients and families.
- Accurate and complete documentation of plans and interventions.

The absence of any non-compliance underscores the department's commitment to excellence, accountability, and continuous quality improvement. These results also reflect the effectiveness of ongoing staff training, supervision, and leadership engagement in protocol implementation.

## 7. Recommendations

Based on this flawless performance, the following steps are recommended to maintain and sustain the achieved standards:

1. **Continue Regular Monitoring:** Maintain quarterly audits to ensure consistent practice and early identification of any deviations.
2. **Celebrate Success:** Recognize the department's performance through staff appreciation and public acknowledgment.
3. **Incorporate Protocol Review in CPD:** Include protocol refresher sessions in continuous professional development training to reinforce best practices.
4. **Use Results as a Model:** Share the ED's approach and success with other departments as a model for quality care.

## 8. Conclusion

The audit of Emergency Department round protocol adherence for the 4th quarter of 2017 E.C. confirmed **100% compliance** across all assessed patient charts and parameters. This outstanding result reflects a high-functioning clinical team with a strong culture of discipline, professionalism, and patient-centered care. The current momentum should be preserved and leveraged to further institutionalize excellence throughout the hospital.

## 9. Action Plan

To maintain the achieved high level of compliance and ensure consistent quality of care, the following action plan has been set:

Focus Area	Action to Be Taken	Responsible Body	Timeline
Sustainability	Maintain routine use of the round protocol and reinforce it through regular team discussions.	ED Head Nurse & QI Team	Continuous
Quarterly Audit	Conduct structured quarterly audits to monitor compliance and identify early signs of deviation.	Quality Improvement (QI) Team	Every 3 months

## 10. References

1. Ministry of Health, Ethiopia (2020). *Standard Operating Procedures for Emergency Care*
2. World Health Organization (2016). *Framework for Effective Clinical Rounds*
3. Institute for Healthcare Improvement (IHI). *Best Practices in Emergency Rounding*
4. Deder General Hospital – Quality Improvement Unit (2016 E.C.). *Internal Round Monitoring Guide*

