



DEDER GENERAL HOSPITAL
SURGICAL AND ANESTHESIA CARE DEPARTMENT



SURGICAL WARD WEEKLY SENIOR CHART ROUND REPORT

By:

1. Dr. Isak Abdi (MD, G/ Surgeon)
2. Dr. Meron (MD, G/ Surgeon)
3. Endalkachew Mekonin (BSc, MSc)- IESO
4. Kalifa Jemal (BScN)-Surgical Ward Head

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INTRODUCTION

The weekly chart round is a routine activity aimed at reviewing patient care and identifying gaps to ensure optimal treatment outcomes. This report summarizes observations, compliance, and recommendations from the review conducted from **June 01-30, 2017** E.C in the Surgical Ward.

Aim

- ✎ To ensure adherence to clinical standards, enhance patient outcomes, and address lapses in care delivery through evidence-based recommendations.

Objectives

- ✎ Evaluate the accuracy of clinical assessments and diagnoses.
- ✎ Ensure rational and evidence-based prescription practices.
- ✎ Assess the appropriateness of investigations and their relevance to patient management.
- ✎ Promote effective treatment plans and continuity of care.

Methodology

- ✎ A systematic review of patient charts was conducted.
- ✎ Compliance with indicators, such as rational drug use, complete history-taking, and investigation practices, was verified using the provided checklist.
- ✎ Observations were recorded as "**Yes**" or "**No**" based on compliance.
- ✎ Discrepancies were noted and discussed with attending physicians and nursing staff.

RESULTS

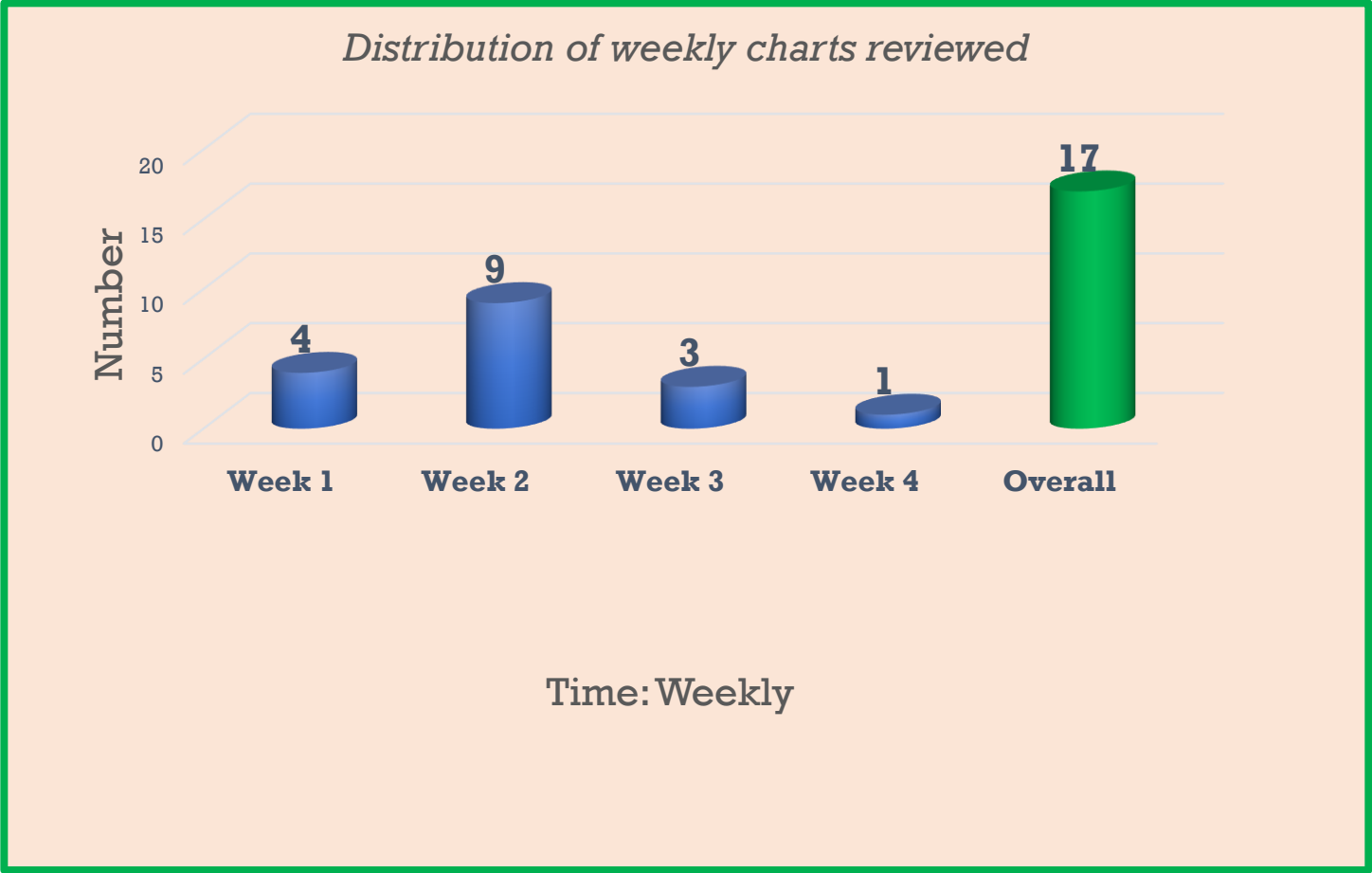


Figure 1: Distribution of weekly charts reviewed, June 2017E.C

The weekly senior chart rounds in June 2017 demonstrated exceptional adherence to established clinical standards, achieving perfect 100% compliance across all measured indicators. All seven key clinical process indicators were met for every single one of the 17 patient charts reviewed during the audit period, resulting in an overall compliance rate of 119 out of 119 possible elements (100%). This indicates a consistently high level of thoroughness and protocol adherence in the documented patient care processes scrutinized during the chart rounds.

Detailed review of the indicators confirms flawless performance in both diagnostic and management aspects of patient care. Charts universally documented complete history taking and physical examinations. Furthermore, investigations ordered, diagnoses made, and treatments prescribed were consistently judged appropriate based on the documented findings and aligned with Standard Treatment Guidelines (STG). Appropriate Nursing Care Plans (NCP) were documented for all cases, and rational drug use was confirmed in every instance reviewed. This uniformity highlights a strong systemic application of required clinical practices.

This report reflects exemplary performance in the specific areas monitored during the senior chart rounds. The consistent 100% compliance rate across all indicators and all charts suggests a robust system for ensuring fundamental clinical documentation and decision-making processes are followed meticulously. While this represents an ideal outcome for the audited criteria, maintaining this standard requires continuous vigilance. Future focus could include sustaining this high performance and potentially examining other quality dimensions or more complex cases not fully captured by these specific binary indicators.

Table 1: weekly senior chart round result, June 2017E.C

Indicator	Compliance (YES)	Non- Compliance (NO)	Percentage Compliance
1. Complete History Taking	17	0	100
2. Complete Physical Examination (P/E)	17	0	100
3. Appropriate Investigation Based on Hx & P/E Findings	17	0	100
4. Appropriate Diagnosis Based on Hx, P/E & Workup	17	0	100
5. Appropriate Treatment (Rx) and in Agreement with STG	17	0	100
6. Appropriate Nursing Care Plan (NCP)	17	0	100
7. Rational drug use	17	0	100
Overall compliance performance	119/119	0/119	100

DISCUSSION

The performance reports for June 2017 present a nuanced picture of the surgical department's operations, highlighting both areas of exemplary strength and opportunities for further refinement. The **Senior Chart Round audit** reveals an outstanding level of adherence to fundamental clinical processes and documentation standards. Achieving 100% compliance across all seven indicators (including complete history, physical exam, appropriate investigations, diagnosis, treatment aligned with STG, nursing care plans, and rational drug use) for all 17 charts audited is a significant accomplishment. This demonstrates a robust system for ensuring that essential clinical protocols are consistently documented and followed at the point of care planning, reflecting strong discipline and quality control within the clinical team during the charting process. Such high compliance is indicative of a culture prioritizing thoroughness and guideline adherence in diagnostic and therapeutic decision-making.

Conversely, the **Surgical Ward Length of Stay (LOS) report** suggests that while overall efficiency per patient (as measured by the Average LOS of 2.7 days, beating the 3.0-day target) was positive, translating process compliance into optimal operational outcomes faced challenges. The total post-operative LOS exceeded the target by 2 days (38 vs. 36 days), attributable solely to overruns in two specific, low-volume cases (PUD and Goiter, each exceeding target by 1 day). This discrepancy highlights a potential gap between documented care plans and actual patient progression or resource management post-operatively for certain conditions. Despite the flawless chart compliance indicating plans were appropriate *on paper*, factors such as unexpected complications, variations in individual patient recovery, discharge coordination delays, or bed management issues may have influenced the actual stay duration for these specific cases, preventing the department from achieving its total LOS target.

RECOMMENDATIONS

- 🔗 **SUSTAIN THE CURRENT PERFORMANCE BY REGULAR M&E**

IMPROVEMENT PLAN

- 🔗 **NO MAJOR GAP SEEN**

References

1. **Standard Treatment Guidelines (STG):** Ministry of Health Guidelines for Clinical Practice.
2. **WHO Handbook for Health Services Evaluation:** Tools and Techniques for Quality Improvement, World Health Organization.
3. **Clinical Audit in Healthcare:** Principles for Effective Audit, National Institute for Health and Care Excellence (NICE).
4. **Rational Use of Medicines:** World Health Organization Guidelines on Essential Medicines Use.
5. **Nursing Care Standards:** Guidelines for Comprehensive Nursing Care Plan Documentation.
6. **Medical Education and Training Resources:** Framework for Enhancing Clinical Competency, Medical Council Standards.

Guyyaa/ቀን/Date: ____/____/____

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

Dhimmii waa'ee Gabaasa weekly senior chart round eerguu ilaallata

Akkuma mata dure irratti ibsamuuf yaalameettii Gabaasa "**weekly senior chart round report**" Garee **SURGICAL WARD** kan **Ji'a 1** Offaa bara **2017** xalayaa **fuula 09** qabu gaggeessitu kana wajjiin wal qabsifnee isiniif eergu keenya kabajaan isiin beeksiifna Nagayaa wajjiin!!

Nagaya wajjiin!!