



DEDER GENERAL HOSPITAL

Surgical Ward CASE TEAM

Patient Transportation Protocol Utilization Monitoring Report

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Deder, Oromia

June 2017E.C

Table of Contents

List of Figure and Table.....	i
Introduction	1
Objective	1
Methodology	2
Result	3
Discussion.....	4
Recommendations.....	5

List of Figure and Table

No table of figures entries found.

Table 1: Criteria and standards.....	1
Table 2: Implementation Status of previous improvement plan.....	Error! Bookmark not defined.

Introduction

Effective patient transportation within Deder General Hospital (DGH) is essential to ensuring that patients receive timely, safe, and appropriate care. The Surgical Ward at DGH follows a specific Patient Transportation Protocol to maintain patient safety, clear communication, and quality care throughout the transport process. This report provides an evaluation of the utilization of the Patient Transportation Protocol, based on observations and interviews with patients, focusing on compliance with key transportation criteria.

Objective

The primary objectives of this monitoring report are:

1. To assess the utilization of the Patient Transportation Protocol in the Surgical Ward of Deder General Hospital.
2. To ensure that patients are transported in a timely and secure manner while adhering to the established guidelines.

Table 1: Criteria and standards

Criteria	Verification	
	Compliant (Yes)	Non-compliant (No)
Proper Identification		
Clear Communication with Patient		
Transport Team Briefed		
Necessary Surgical Equipment		
Safe Transfer Techniques Used		
Safety Precautions Followed		
Minimal Delays in Transport		
Proper Handover		
Infection Control Measures		
Proper Identification		
Clear Communication with Patient		

Methodology

The following methodology was employed to evaluate the utilization of the Patient Transportation Protocol at DGH's Surgical Ward:

1. **Sample Selection:** A total of 13 patients were randomly selected for evaluation during their transportation within the Surgical Ward.
2. **Criteria for Evaluation:** The Patient Transportation Protocol includes 9 key indicators
3. **Data Collection:** Data was collected through direct observation of the patient transport process and interviews with patients to confirm protocol adherence. Additionally, Registered Nurses (RNs) confirmed and documented compliance for each criterion.
4. **Monitoring and Scoring:** Each criterion was evaluated using a binary scale (Yes/No). A "Yes" response indicated that the protocol was followed, while a "No" response indicated non-compliance.
5. **Analysis:** The compliance rates for each criterion were calculated, and the overall compliance rate was determined by dividing the number of compliant responses by the total possible responses. The final compliance percentage was then calculated.

Result

Overall, the Surgical Ward demonstrated excellent adherence to the Patient Transportation protocol in June 2017 E.C., achieving a high compliance rate of 97%. This strong performance is reflected in 113 out of 117 monitored protocol steps being successfully executed. The vast majority of individual criteria—8 out of 9—showed flawless 100% compliance, indicating consistent application of best practices across critical aspects of patient transport. These included essential safety and communication elements such as Proper Identification, Clear Communication with Patient, Transport Team Briefed, Safe Transfer Techniques, Safety Precautions, Minimal Delays, Proper Handover, and Infection Control Measures.

Despite the high overall performance, one area—ensuring all Necessary Surgical Equipment was available and prepared for transport—showed a notable dip in compliance (69%). This criterion accounted for all 4 observed non-compliant instances, revealing a specific operational gap. While other safety and communication protocols were rigorously followed, this deficiency highlights a potential vulnerability in equipment readiness that could impact efficiency or safety during patient transfers. Addressing this single outlier represents a clear opportunity to elevate the protocol's reliability from 97% to near-perfect adherence (Table 2).

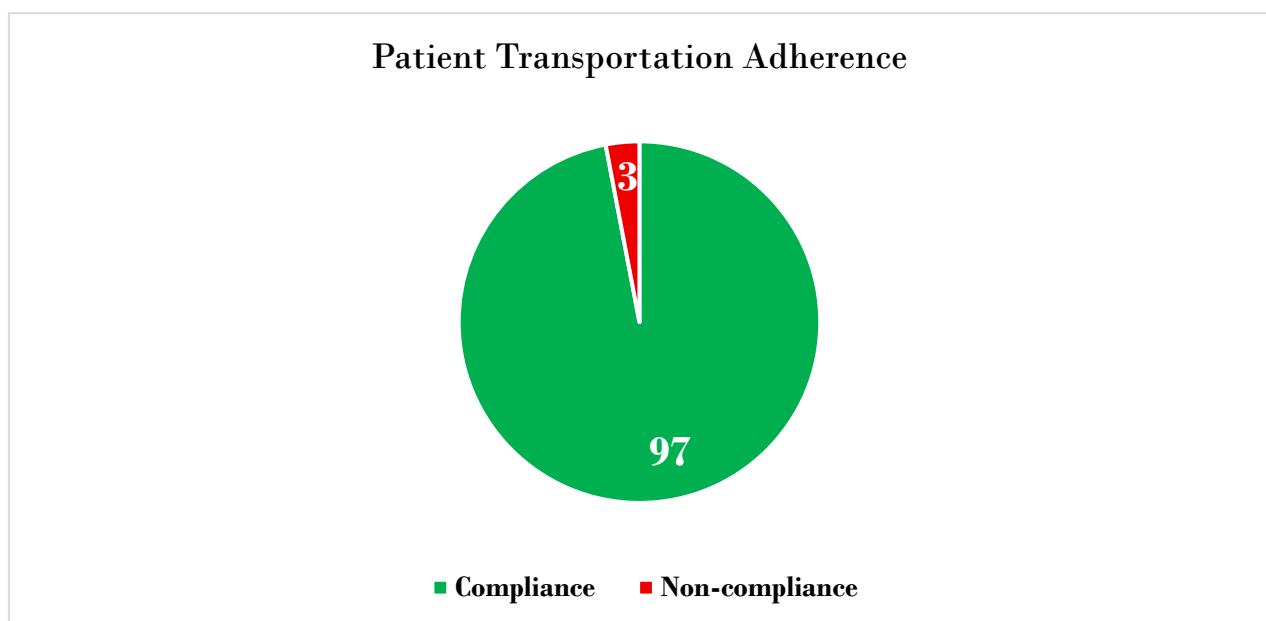


Figure 1: Surgical Ward Patient Transportation protocol adherence monitoring performance, June 2017E.C

Table 2: Surgical Ward Patient Transportation protocol adherence monitoring performance, June 2017E.C

	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 Surgical Equipment	9	4	69%
Safe Transfer Techniques Used	13	0	100%
Safety Precautions Followed	13	0	100%
Minimal Delays in Transport	13	0	100%
Proper Handover	13	0	100%
Infection Control Measures	13	0	100%
Total Compliant Cases	113/117	4/117	97%

DISCUSSION

The Surgical Ward achieved strong overall compliance (97%) with the Patient Transportation Protocol in June 2017 E.C., reflecting effective standardization of critical safety and communication practices. Eight of nine protocol criteria demonstrated perfect adherence (100%), including *Proper Identification*, *Safe Transfer Techniques*, *Infection Control*, and *Handover Procedures*. This excellence in foundational safety measures—particularly in high-risk areas like patient handling and infection prevention—signifies robust operational discipline and a culture prioritizing patient safety during transitions. The consistency across 13 observed cases further confirms that staff have internalized core protocol requirements, minimizing risks associated with intra-hospital transport.

However, the significant gap in **Necessary Surgical Equipment readiness (69% compliance)** warrants attention, as it accounted for all four non-compliant instances. This 31% shortfall suggests systemic issues in equipment preparation or verification processes, potentially leading to procedural delays, compromised care, or reactive problem-solving during transport. While other metrics confirm reliable execution of patient-centered actions (e.g., 100% in *Clear Communication* and *Minimal Delays*), the equipment deficiency reveals a logistical vulnerability that could undermine otherwise safe transfers. Root causes may include inadequate pre-transport checklists, inventory management gaps, or unclear staff accountability. Addressing this single outlier through targeted interventions—such as standardized equipment checklists or real-time verification systems—could elevate overall compliance to near-perfect levels while enhancing operational reliability.

Recommendations

- ☒ **Necessary Surgical Equipment Readiness:** implement Pre-Transport

Improvement plan, June 2017

Area	Actions	Responsible body	Timeline
Necessary Surgical Equipment Readiness	Implement Pre-Transport Checklist: Mandatory equipment verification (oxygen, IV poles, drains, emergency kit) with dual nurse-porter sign-off.	Nursing Supervisor • Porter Lead	<i>Immediate (1 week)</i>



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- ❖ 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** “**Patient transportation**” Jedhamu kan kurmaana **4ffaa** bara **2017** xalayaa **Fuula 8** qabuu gaggeessituu kana waliin walqabsiifnee isiiniif eerguu keenya kabajaan isiniif beeksiifnaa.

Nagaya wajiin!!