



DEDER GENERAL HOSPITAL

OUTPATIENT DEPARTMENT

Bad News Breaking Protocol Utilization Monitoring Report

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Report period: 4th quarter of 2017E.C

Deder, Oromia

June 2017E.C

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Introduction

Effective communication during difficult moments is a cornerstone of quality healthcare, particularly when delivering bad news to patients and their families. At Deder General Hospital (DGH), the ***Bad News Breaking Protocol*** serves as a structured framework to ensure that sensitive information is conveyed with clarity, empathy, and professionalism. This report evaluates the utilization of the protocol in the Surgical Ward during the **3rd quarter of 2017E.C.**, assessing adherence to key standards such as preparation, communication techniques, emotional support, and documentation.

Objective

The primary objectives of this monitoring report are:

1. To assess the level of compliance with the Bad News Breaking Protocol in the Outpatient Department (OPD)
2. To identify areas of improvement in protocol adherence.
3. To ensure that patients and their families are supported with clear, empathetic communication during the delivery of bad news.

Table 1: Criteria and standards

Criteria	Verification	
	Compliant (Yes)	Non-compliant (No)
Preparation Before Meeting		
Preparation Before Meeting		
Appropriate Setting Chosen		
Compassionate Introduction		
Use of Clear and Simple Language		
Sensitive Communication		
Time for Processing Information		
Patient/Family Questions Encouraged		
Offer of Emotional Support		
Plan for Next Steps Discussed		
Follow-Up Arranged		

METHODOLOGY

The evaluation of the OPD Bad News Protocol was carried out through a combination of observational methods and direct feedback from both staff and patients. The methodology includes:

1. **Observations:** Staff interactions during the delivery of bad news were observed to assess compliance with protocol criteria, including preparation, language clarity, compassionate tone, and privacy.
2. **Interviews:** Both staff and patients/families were interviewed to gather insights into their experiences with bad news delivery. Staff were asked about their adherence to the protocol, while patients and families were questioned regarding their perceptions of the communication they received.
3. **Documentation Review:** Medical records were reviewed to assess the completeness and accuracy of documentation related to bad news delivery, including patient responses and follow-up arrangements.
4. **Compliance Checklist:** A compliance checklist was used to evaluate each step of the protocol. Compliance was measured as "Yes" or "No," and additional comments were recorded to provide context for each evaluation.

RESULT

Overall, the Outpatient Department (OPD) demonstrated flawless adherence to the Bad News Breaking protocol in June 2017 E.C., achieving a perfect 100% compliance rate across all monitored criteria. This exceptional performance is reflected in the 130 out of 130 protocol steps being fully executed without a single non-compliance instance observed. The data confirms that every one of the 13 recorded cases met all 10 established standards for delivering difficult news, signifying consistent, exemplary application of the protocol throughout the monitoring period.

The results indicate universal compliance across every critical component of the protocol. Staff consistently excelled in all areas, including thorough preparation and privacy assurance (100%), selecting appropriate, interruption-free settings (100%), compassionate introductions and clear communication (100%), allowing processing time (100%), actively encouraging questions (100%), offering emotional support resources (100%), discussing clear next steps (100%), and complete documentation (100%). The absence of any "No" responses underscore a department-wide commitment to best practices in sensitive patient communication during this period (**Table 2**).

Table 2: OPD Bad News Breaking protocol adherence monitoring performance, June 2017E.C

Variable	Yes	No	% Compliance
1. Preparation Before Meeting: Staff reviewed the patient's case and ensured privacy before delivering the news.	13	0	100
2. Appropriate Setting Chosen: Bad news was delivered in a quiet, private setting without interruptions.	13	0	100
3. Compassionate Introduction: Staff introduced themselves, explained their role, and prepared the patient/family for the news.	13	0	100
4. Use of Clear and Simple Language: The news was delivered using clear, straightforward language without medical jargon.	13	0	100
5. Sensitive Communication: Staff used a compassionate tone, displayed empathy, and maintained eye contact.	13	0	100
6. Time for Processing Information: The patient and family were given time to process the information, with space for silence if needed.	13	0	100
7. Patient/Family Questions Encouraged: Patients and family members were encouraged to ask questions, and staff provided clear, thoughtful responses.	13	0	100
8. Offer of Emotional Support: Emotional support resources (e.g., psychologist, social worker) were offered to the patient/family.	13	0	100
9. Plan for Next Steps Discussed: After delivering the news, staff discussed the next steps in treatment, care options, or further actions.	13	0	100
10. Documentation: The delivery of the bad news and the patient response were documented in the medical record.	13	0	100
Overall	130/130	0/130	100%

DISCUSSION

The Outpatient Department (OPD) achieved **exceptional, flawless adherence** (100% compliance) to the Bad News Breaking protocol in June 2017 E.C., as evidenced by universal compliance across all 10 criteria in all 13 observed cases. This perfect performance signifies a **rigorously embedded protocol** and reflects a department-wide commitment to compassionate, patient-centered communication. The absence of any non-compliance—particularly in historically challenging areas like *Offering Emotional Support* (which scored 69% in the Pediatric Ward's March 2017 report) and *Appropriate Setting* (77% in Pediatrics)—suggests that the OPD has successfully operationalized best practices for delivering difficult news. Such consistency is remarkable in an outpatient setting, where time constraints and environmental unpredictability often complicate sensitive conversations.

The results demonstrate that OPD staff have mastered **both technical and relational dimensions** of bad news delivery. Universal compliance in *Preparation*, *Clear Language*, and *Documentation* (100% each) reflects strong procedural discipline, while perfect scores in *Compassionate Introduction*, *Sensitive Communication*, and *Emotional Support* highlight consistently empathetic patient engagement. Notably, the 100% compliance in *Encouraging Questions* and *Discussing Next Steps* indicates effective shared decision-making—a critical factor in reducing patient anxiety and fostering trust. This holistic excellence suggests that the OPD's training, monitoring, and cultural emphasis on dignity in communication have aligned to create a replicable standard for high-stakes interactions. To sustain this excellence, ongoing audits and patient feedback mechanisms are recommended, though these results position the OPD as a benchmark for other departments.

RECOMMENDATIONS

- ☒ NO MAJOR GAP SEEN

PERFORMANCE IMPROVEMENT PLAN

- ☒ CONDUCT QUARTERLY AUDIT

Table 2: The Implementation Status of Previous Performance improvement plan, June 2017E.C

Gap Identified	Action Taken	Status
Use of Clear and Simple Language	Training sessions conducted for staff on non-medical language usage.	Completed
Inconsistent Sensitive Communication	Sensitivity training completed; role-playing scenarios implemented.	Ongoing
Patient/Family Questions Not Fully Addressed	Active listening techniques integrated into staff meetings.	Partially Implemented
Follow-Up/Next Steps Not Fully Discussed	Standardized checklist for next steps introduced in EHR.	Completed



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

Dhimmi: waa'ee Gabaasa Structural protocol mon erguu ilaala

Akkuma mata Dureerrattii ibsamuuf yaalameettii **Structural protocol** “**Bad News Breaking**” Jedhamu kan kurmaana **4ffaa** bara **2017** xalayaa **Fuula 9** qabuu gaggeessituu kana waliin walqabsiifnee isiiniif eerguu keenya kabajaan isiniif beeksiifnaa.

Nagaya wajiin!!