

DEDER GENERAL HOSPITAL

Bad News Breaking Protocol Adherence Monitoring Report

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**July 2017
Deder, Oromia**

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1. Introduction

Delivering difficult news to patients and their families is one of the most emotionally sensitive responsibilities in healthcare. In pediatrics, this process is particularly delicate, as families are often navigating distressing circumstances involving their child's health. Recognizing this, Deder General Hospital has established a structured **Bad News Breaking Protocol** within the Pediatric Ward to ensure such communications are handled with empathy, clarity, and professionalism.

This report summarizes the findings of a comprehensive monitoring exercise conducted in **July 2017 E.C.**, evaluating the ward's adherence to the protocol and identifying opportunities for continued improvement.

2. Objectives

The objectives of this monitoring initiative are:

1. To assess staff adherence to the Bad News Breaking Protocol in the Pediatric Ward.
 2. To evaluate the consistency and quality of communication during the delivery of difficult news.
 3. To identify specific areas needing improvement in order to enhance the emotional and informational support provided to patients and families.
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3. Methodology

The monitoring exercise was conducted using a systematic and evidence-based approach:

- **Sample Size:** 13 bad news communication instances were reviewed during July 2017 E.C.
 - **Assessment Tool:** An 11-item protocol adherence checklist was used.
 - **Data Collection:**
 - **Direct observation** of real-time interactions during communication of bad news.
 - **Interviews** with both staff and families to assess their experience and perception.
 - **Review of medical documentation** to verify completeness of communication and follow-up notes.
 - **Scoring:** Each parameter was rated as "Compliant (Yes)" or "Non-Compliant (No)".
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4. Results

The Pediatric Ward demonstrated a **remarkable overall compliance rate of 98%**. Out of a total of 143 indicators (11 indicators across 13 cases), **140 were compliant**, reflecting strong institutional adherence to established communication protocols.

Parameters with 100% Compliance

- Preparation before the meeting
- Selection of an appropriate and private setting
- Compassionate and structured introduction
- Use of clear and simple, non-technical language
- Sensitive and empathetic communication style
- Allowing time for the family to process the information
- Offering emotional support resources
- Ensuring proper documentation
- Arranging follow-up plans

These results indicate the staff consistently maintained the integrity of the protocol's core components and showed strong skills in delivering bad news compassionately and professionally.

Parameters Requiring Minor Improvement

1. **Patient/Family Questions Encouraged:**
 - Compliance: 12/13 (92%)
 - In one case, staff proceeded with explanations without sufficiently inviting or addressing questions from the family. This minor oversight may have affected the family's sense of participation and clarity.
2. **Plan for Next Steps Discussed:**
 - Compliance: 12/13 (92%)
 - In one instance, next steps were only partially communicated, without a clear outline of care options or treatment expectations. Clarifying future care is essential to reduce anxiety and build trust.

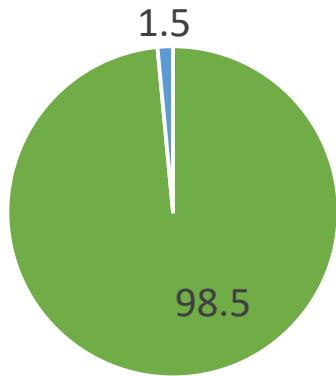
Table 1: Protocol Compliance by Criteria – July 2017 E.C.

Criteria	Compliant (Yes)	Non-Compliant (No)	Compliance Rate (%)
Preparation Before Meeting	13	0	100
Appropriate Setting Chosen	13	0	100
Compassionate Introduction	13	0	100
Use of Clear and Simple Language	13	0	100

Criteria	Compliant (Yes)	Non-Compliant (No)	Compliance Rate (%)
Sensitive Communication	13	0	100
Time for Processing Information	13	0	100
Patient/Family Questions Encouraged	12	1	92
Offer of Emotional Support	13	0	100
Plan for Next Steps Discussed	12	1	92
Documentation Completed	13	0	100
Follow-Up Arranged	13	0	100
Total	140	3	98%

Figure: Bad News Breaking Protocol Adherence Monitoring Report

Protocol Compliance by Criteria – July 2017 E.C.



■ compliance ■ non-compliance

5. Discussion

The high compliance rate (98%) in July 2017 E.C. reflects Deder General Hospital's **strong institutional culture** of empathy, respect, and professionalism. The Pediatric team has effectively integrated the Bad News Breaking Protocol into daily practice, ensuring that difficult conversations are carried out with care and clarity. The full compliance in key domains—such as preparation, setting, clarity, and emotional support—underscores the team's commitment to both **procedural integrity and patient-centered care**.

Nonetheless, the two areas with slightly lower compliance—**encouraging family questions** and **discussing the next steps in care**—highlight important opportunities. Families often feel overwhelmed after receiving difficult news, and clear communication about what comes next, as well as allowing space for questions, can significantly ease that burden.

Enhancing staff responsiveness to patient questions and emphasizing complete future care planning will ensure more **collaborative, transparent, and reassuring communication**.

6. Recommendations

To ensure continuous quality improvement in communication practices, the following actions are recommended:

1. **Reinforce Two-Way Communication**
 - Train staff to explicitly pause and invite questions after delivering news.
 - Use structured phrases like: "What concerns or questions do you have?"
 2. **Standardize Care Transition Planning**
 - Create a checklist or script to ensure that the next steps—treatment plans, referrals, or monitoring—are consistently and clearly outlined.
 3. **Ongoing Training and Peer Review**
 - Organize quarterly communication workshops and peer simulations focused on difficult conversations and patient engagement.
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Table 2: Action Plan – July 2017 E.C.

Area for Improvement	Proposed Actions	Responsible Teams	Timeline
Encourage Patient/Family Questions	Incorporate pauses for questions in training; introduce mandatory check-in prompts	Clinical Educators, QI Team	Within 1 month

Area for Improvement	Proposed Actions	Responsible Teams	Timeline
Discuss Next Steps Clearly	Add protocol-based checklist for care/treatment planning after news is delivered	Pediatricians, Nursing Leads	1–2 months
Communication Skill Sustainability	Conduct quarterly communication drills and reflective case reviews	Ward In-Charge, HR Unit	Quarterly

7. Conclusion

The **July 2017 E.C.** monitoring of the **Bad News Breaking Protocol** in Deder General Hospital's Pediatric Ward reveals an **excellent overall adherence rate of 98%**, with staff consistently delivering difficult news using best-practice standards. The strengths observed—particularly in preparation, empathy, clarity, and follow-up—underscore the effectiveness of the existing protocol and the dedication of the healthcare team.

Minor improvements related to engaging families in dialogue and explicitly outlining next steps can further refine communication practices and reinforce trust. With targeted training and process adjustments, Deder General Hospital is well-positioned to maintain and elevate its compassionate standard of care in even the most emotionally challenging interactions.

