



PSYCHIATRY				
NO	INDICATOR	DIMENSION	STANDARD	SECONDARY DATA REPORTING FREQUENCY
1a	Percentage of patients with waiting time of ≤ 60 minutes to see the doctor at the Psychiatry Outpatient Clinic (Two or more registration areas involved)	Timeliness	≥ 80%	Monthly
1b	Percentage of patients with waiting time of ≤ 90 minutes to see the doctor at the Psychiatry Outpatient Clinic (Only one registration area involved)	Timeliness	≥ 90%	Monthly
2	Defaulter rate among Psychiatric outpatients	Effectiveness	≤ 10%	3 Monthly
3	Percentage of new patients reviewed by psychiatrist within (≤) 30 days at Psychiatry Outpatient Clinic	Customer centeredness	≥ 90%	3 Monthly

*For indicator 1, each department to report either 1a **OR** 1b, and not both. (Refer technical specification)



Indicator 1

*Either indicator 1a OR 1b is to be reported, based on how many registration counters are involved.

- **Two or more registration areas are involved:** If registration of patient is first done at hospital's main outpatient/ ACC complex registration counter with payment collection, following which the patient needs to re-register at the respective clinical department counter - Refer **Indicator 1a**.
- **Only one registration area is involved:** If registration of patient with payment collection is either done **ONLY** at clinical department counter **OR** it is done **ONLY** at hospital's main outpatient/ ACC complex registration counter with no further re-registration required at the clinical department counter- Refer **Indicator 1b**.

Discipline	:	Psychiatry
Indicator 1a	:	Percentage of patients with waiting time of ≤ 60 minutes to see the doctor at the Psychiatry Outpatient Clinic (Two or more registration areas involved)
Dimension of Quality	:	Timeliness
Rationale	:	<ol style="list-style-type: none"> 1. MOH aims for waiting time to see the doctor at outpatient services, to be less than 90 minutes, in line with patient-centred services. Waiting time is time <u>patient first registers in the hospital</u> till the time patient is seen by doctor. (Reference: Director-General of Health Malaysia Circular No. 6/2004) 2. The waiting time is based on patient's experience from the time the patient first registers at the first counter in the hospital till seen by doctor. In view of many counters being involved in some hospitals/ departments, some clinical departments have opted for monitoring of registration from department counter, as any process prior to that appears out of the clinical department's control. Thus, due to involvement of 2 or more counters within the hospital, for monitoring of clinical services KPI, the target of waiting time is for less than 60 minutes within the department. This is applicable only if patient is being registered at another counter within the same hospital (e.g. at hospital's main outpatient/ ACC complex registration counter) prior to the clinical department counter. 3. For hospitals to eliminate or reduce waiting time, it is important to balance between the demand for appointments and the supply of appointments. One needs to identify opportunities for improvement by strengthening the policy of outpatient services in hospital, apply Queuing Theory and having contingency plans.
Definition of Terms	:	<p>Two or more registration areas involved: If registration of patient is first done <u>at hospital's main outpatient/ ACC complex registration counter with payment collection, following which the patient needs to re-register at the respective clinical department counter:</u></p> <p>Waiting time: Time of registration counter at department counter or time of appointment given to patient (whichever is later) till the time the patient is first seen by the doctor, which is beginning of a consultation.</p>
Criteria	:	<p>Inclusion:</p> <ol style="list-style-type: none"> 1. All outpatients of Psychiatry Outpatient Clinic. <p>Exclusion:</p> <ol style="list-style-type: none"> 1. Patients who come without an appointment ("walk-in" patients). 2. Patients that need to do procedures on the same day before seeing the doctors (e.g. blood taking or imaging).



		<p>Sampling: Using an average of total patients seen in a month, 30% of the patients in each month need to be sampled for this indicator. For example, in a case of 22 clinic days per month, 7 clinic days in a month need to be selected for data collection. Hospital/ department to ensure randomised sampling of data by ensuring each clinic day of the week is included to ensure proper representation of data.</p>									
Type of indicator	:	Rate-based process indicator									
Numerator	:	Number of sampled patients with waiting time of ≤ 60 minutes to see the doctor at the Psychiatry Outpatient Clinic									
Denominator	:	Total sample of patients seen by the doctor at the Psychiatry Outpatient Clinic									
Formula	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$									
Standard	:	≥ 80%									
Data Collection & Verification	:	<ol style="list-style-type: none"> Where: Data will be collected in the Psychiatry Outpatient Clinic. Who: Data will be collected by Officer/ Paramedic/ Nurse in-charge of the department/ unit. How to collect: Data is suggested to be collected from patient's case notes/ appointment record book/ waiting time slip. How frequent: Monthly data collection within department. Validated summarised secondary data to be sent monthly to Quality Unit of the respective hospital for monitoring. PVF to be sent 6 monthly to Quality Unit of hospital. Who should verify: <table border="1" data-bbox="613 1075 1409 1247"> <thead> <tr> <th></th> <th>Prepared by</th> <th>Validated by</th> </tr> </thead> <tbody> <tr> <td>Primary Data</td> <td>Officer/ Paramedic/ Nurse in-charge</td> <td>Supervisor of the person who prepared the data</td> </tr> <tr> <td>Secondary Data</td> <td>Officer/ Paramedic/ Nurse in-charge</td> <td>Head of Department/ Specialist in-charge</td> </tr> </tbody> </table> <p>PVF must be verified by Head of Department, Head of Quality Unit and Hospital Director.</p>		Prepared by	Validated by	Primary Data	Officer/ Paramedic/ Nurse in-charge	Supervisor of the person who prepared the data	Secondary Data	Officer/ Paramedic/ Nurse in-charge	Head of Department/ Specialist in-charge
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Remarks	:										

Discipline	:	Psychiatry
Indicator 1b	:	Percentage of patients with waiting time of ≤ 90 minutes to see the doctor at the Psychiatry Outpatient Clinic (Only one registration area involved)
Dimension of Quality	:	Timeliness
Rationale	:	<ol style="list-style-type: none"> MOH aims for waiting time to see the doctor at outpatient services, to be less than 90 minutes, in line with patient-centred services. Waiting time is time <u>patient first registers in the hospital</u> till the time patient is seen by doctor. (Reference: Director-General of Health Malaysia Circular No. 6/2004) The waiting time is based on patient's experience from the time the patient first registers at the first counter in the hospital till seen by doctor. In view of many counters being involved in some hospitals/ departments, some clinical departments have opted for monitoring of registration from department counter, as any process prior to that appears out of the clinical department's



		<p>control. Thus, due to involvement of 2 or more counters within the hospital, for monitoring of clinical services KPI, the target of waiting time is for less than 60 minutes within the department. This is applicable only if patient is being registered at another counter within the same hospital (e.g. at hospital's main outpatient/ ACC complex registration counter) prior to the clinical department counter.</p> <p>3. For hospitals to eliminate or reduce waiting time, it is important to balance between the demand for appointments and the supply of appointments. One needs to identify opportunities for improvement by strengthening the policy of outpatient services in hospital, apply Queuing Theory and having contingency plans.</p>
Definition of Terms	:	<p><u>If registration of patient with payment collection is done ONLY AT CLINICAL DEPARTMENT COUNTER:</u> Waiting time: Time of registration counter at department counter or time of appointment given to patient (whichever is later) till the time the patient is first seen by the doctor, which is beginning of a consultation.</p> <p><u>If the registration is done ONLY AT HOSPITAL'S MAIN OUTPATIENT / ACC COMPLEX REGISTRATION COUNTER, with no re-registration at the clinical department counter:</u> Waiting time: Time of registration counter at hospital's main outpatient/ ACC complex registration counter or time of appointment given to patient (whichever is later) till the time the patient is first seen by the doctor, which is beginning of a consultation.</p>
Criteria	:	<p>Inclusion:</p> <ol style="list-style-type: none"> All outpatients of the Psychiatry Outpatient Clinic. <p>Exclusion:</p> <ol style="list-style-type: none"> Patients who come without an appointment ("walk-in" patients). Patients that need to do procedures on the same day before seeing the doctors (e.g. blood taking or imaging). <p>Sampling: Using an average of total patients seen in a month, 30% of the patients in each month need to be sampled for this indicator. For example, in a case of 22 clinic days per month, 7 clinic days in a month need to be selected for data collection. Hospital/ department to ensure randomised sampling of data by ensuring each clinic day of the week is included to ensure proper representation of data.</p>
Type of indicator	:	Rate-based process indicator
Numerator	:	Number of sampled patients with waiting time of ≤ 90 minutes to see the doctor at Psychiatry Outpatient Clinic
Denominator	:	Total sample of patients seen by the doctor at the Psychiatry Outpatient Clinic
Formula	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100 \%$
Standard	:	≥ 90%
Data Collection & Verification	:	<ol style="list-style-type: none"> Where: Data will be collected in the Psychiatry Outpatient Clinic. Who: Data will be collected by Officer/ Paramedic/ Nurse in-charge of the department/ unit.



		<p>3. How to collect: Data is suggested to be collected from patient's case notes/ appointment record book/ waiting time slip.</p> <p>4. How frequent: Monthly data collection within department. Validated summarised secondary data to be sent monthly to Quality Unit of the respective hospital for monitoring. PVF to be sent 6 monthly to Quality Unit of hospital.</p> <p>5. Who should verify:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;"></th> <th style="width: 30%;">Prepared by</th> <th style="width: 40%;">Validated by</th> </tr> </thead> <tbody> <tr> <td>Primary Data</td> <td>Officer/ Paramedic/ Nurse in-charge</td> <td>Supervisor of the person who prepared the data</td> </tr> <tr> <td>Secondary Data</td> <td>Officer/ Paramedic/ Nurse in-charge</td> <td>Head of Department/ Specialist in-charge</td> </tr> </tbody> </table> <p>PVF must be verified by Head of Department, Head of Quality Unit and Hospital Director.</p>		Prepared by	Validated by	Primary Data	Officer/ Paramedic/ Nurse in-charge	Supervisor of the person who prepared the data	Secondary Data	Officer/ Paramedic/ Nurse in-charge	Head of Department/ Specialist in-charge
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Discipline	:	Psychiatry
Indicator 2	:	Defaulter rate among Psychiatric outpatients
Dimension of Quality	:	Effectiveness
Rationale	:	<p>1. Clinically effective management results in low defaulter rate, as patient develop compliance and adherence to treatment.</p> <p>2. Studies have shown that high defaulter rate in psychiatric patients resulted in high morbidity and high mortality.</p>
Definition of Terms	:	Defaulter: Patient who failed to attend outpatient clinic within (\leq) one month (30 days irrespective of working or non-working days) of the appointment date.
Criteria	:	<p>Inclusion:</p> <p>1. All outpatients under follow up of Psychiatry Outpatient Clinic.</p> <p>Exclusion:</p> <p>1. All new cases/ referrals.</p> <p>2. Appointment to counsellor.</p>
Type of indicator	:	Rate-based output indicator
Numerator	:	Number of patients defaulting Psychiatric Outpatient Clinic follow-up
Denominator	:	Total number of patients attending Psychiatric Outpatient Clinic
Formula	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$
Standard	:	$\leq 10\%$
Data Collection & Verification	:	<p>1. Where: Data will be collected in the Psychiatry Outpatient Clinic.</p> <p>2. Who: Data will be collected by Officer/ Paramedic/ Nurse in-charge of the department/ unit.</p> <p>3. How to collect: Data is suggested to be collected from appointment record book.</p> <p>4. How frequent: Monthly data collection within department. Validated summarised secondary data to be sent 3 monthly to Quality Unit of the respective hospital for monitoring. PVF to be sent 6 monthly to Quality Unit of hospital.</p>



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Remarks	<p>: Data collection to be done by 1 month retrospective cohort of data. For April 2021, it will be patients who had appointment in March 2021, to allow one month period for them before they are considered as defaulters.</p> <p>*This indicator is also being monitored as an Outcome Based Budgeting (OBB) indicator.</p>									

Discipline	: Psychiatry
Indicator 3	: Percentage of new patients reviewed by psychiatrist within (\leq) 30 days at Psychiatry Outpatient Clinic
Dimension of Quality	: Customer centeredness
Rationale	: Management of patients comprises proper diagnoses including exclusion of other medical problems, and effective, holistic treatment. This is best achieved through review by psychiatrists, resulting in improved safety and quality of patient care.
Definition of Terms	: <p>New Outpatient cases: First appointment in Psychiatric Clinic.</p> <p>Reviewed: Seen by or discussed with psychiatrist as documented evidence by endorsement/ signature or appropriate entry in patients' medical records.</p> <p>30 days: 30 days (irrespective working or non-working days).</p>
Criteria	: <p>Inclusion:</p> <ol style="list-style-type: none"> All new outpatients at Psychiatry Outpatient Clinic. <p>Exclusion: NA</p>
Type of indicator	: Rate-based process indicator
Numerator	: Number of new patients reviewed by psychiatrist within (\leq) 30 days at Psychiatry Outpatient Clinic
Denominator	: Total number of new patients at Psychiatry Outpatient Clinic
Formula	: $\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$
Standard	: $\geq 90\%$
Data Collection & Verification	: <ol style="list-style-type: none"> Where: Data will be collected in the Psychiatry Outpatient Clinic. Who: Data will be collected by Officer/ Paramedic/ Nurse in-charge of the department/ unit. How to collect: Data is suggested to be collected from patient's case notes/ appointment record book. How frequent: Monthly data collection within department. Validated summarised secondary data to be sent 3 monthly to Quality Unit of the respective hospital for monitoring.



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<p>Remarks</p>	<p>: Data collection to be done by 1 month retrospective cohort of data. For April 2021, it will be new outpatients of March 2021; to allow one month period for these patients to be reviewed by specialist.</p>									

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