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	:	Ophthalmology
Indicator 1a	:	**Percentage of patients with waiting time of ≤ 60 minutes to see the healthcare worker at Ophthalmology Outpatient Clinic (Two or more registration areas involved)**
Dimension of Quality	:	Timeliness
Rationale	:	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 patient first registers at the first counter in the hospital till seen by doctor. In view of many counters are 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 hospital 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 policy of outpatient service in hospital, applying Queuing Theory and having contingency plans.
Definition of Terms	:	<u>If registration of patient is first done at hospital's main outpatient/ ACC complex registration counter with payment collection, following that patient needs to re-register at respective clinical department counter (Two or more registration areas involved)</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 healthcare worker who performed Ophthalmology related assessment (excluding vision taking) for the patient. **Healthcare worker**: Any member of the Ophthalmology Team (Paramedic, Optometrist, Medical Officer or Ophthalmologist) that has the privileged to perform the assessment.
Criteria	:	Inclusion: 1. All outpatients of Ophthalmology Outpatient Clinic.

		Exclusion: 1. Patients who come without an appointment ("walk-in" patients). 2. Patients that need to do non-ophthalmological procedures on the same day before seeing the doctors (e.g. blood taking and imaging). **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.
Type of indicator	:	Rate-based process indicator
Numerator	:	Number of sampled patients with waiting time of ≤ 60 minutes to see the healthcare worker at Ophthalmology Outpatient Clinic
Denominator	:	Total sample of patients seen by the healthcare worker at the Ophthalmology Outpatient Clinic
Formula	:	Numerator x 100 % Denominator
Standard	:	≥ 80%
Data Collection & Verification	:	1. **Where**: Data will be collected in Ophthalmology Outpatient Clinic. 2. **Who**: Data will be collected by Officer/ Paramedic/ Nurse in-charge of the department/ unit. 3. **How to collect**: Data is suggested to be collected from patient's case notes/ appointment record book/ waiting time slip. 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. 5. **Who should verify**: <table><tr><td></td><td>Prepared by</td><td>Validated by</td></tr><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></table> PVF must be verified by Head of Department, Head of Quality Unit and Hospital Director.
Remarks	:	