



ANAESTHESIOLOGY (GENERAL)				
NO	INDICATOR	DIMENSION	STANDARD	HOSPITAL REPORTING FREQUENCY
1	Percentage of patients on Acute Pain Service (APS) with pain score of less than 4 within the first 24 hours after surgery at rest	Effectiveness	≥ 80%	Monthly
2	Ventilator care bundle (VCB) compliance rate	Safety	≥ 95%	Monthly
3	Percentage of elective surgical cancellations after pre-operative assessment in the Anaesthetic Clinic	Customer	≤ 5%	Monthly



Indicator 1	:	Departmental
Discipline	:	Anaesthesiology (General)
Name of indicator	:	Percentage of patients on Acute Pain Service (APS) with pain score of less than 4 within the first 24 hours after surgery at rest
Dimension of Quality	:	Effectiveness
Rationale	:	Post-operative patients in the wards sometimes do not have adequate pain relief despite being managed by the acute pain team.
Definition of Terms	:	Pain score: Measures a patient's pain intensity using the MOH Pain scale (zero to ten).
Criteria	:	Inclusion: 1. All patients on acute pain service. Exclusion: 1. Day care and ICU patients.
Type of indicator	:	Rate-based process indicator
Numerator	:	Number of patients on APS with pain score of less than 4 within the first 24 hours after surgery at rest
Denominator	:	Total number of patients on APS after surgery
Formula	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$
Standard	:	≥ 80%
Data Collection	:	1. Where: Data will be collected in wards that cater for the above condition. 2. Who: Data will be collected by Officer/ Paramedic/ Nurse in-charge (indicator co-ordinator) of the department/ unit. 3. How frequent: Monthly data collection. 4. Who should verify: All performance data must be verified by Head of Department/ Head of Unit/ Hospital Director. 5. How to collect: Data is suggested to be collected from record book(refer to KPI MOH Guidelines).
Remarks	:	

Indicator 2	:	Departmental
Discipline	:	Anaesthesiology (General)
Name of indicator	:	Ventilator care bundle (VCB) compliance rate
Dimension of Quality	:	Safety
Rationale	:	1. Ventilator care bundle (VCB) is a set of interventions to reduce the incidence of ventilator-associated pneumonia. 2. Ventilator-associated pneumonia (VAP) is a complication that develops in a patient after 48 hours of mechanical ventilation, which carries morbidity and mortality. 3. The VCB is an on-going quality improvement initiative under the Malaysian Registry of Intensive Care.
Definition of Terms	:	Ventilator Care Bundle (VCB): A set of 4 interventions which are : 1. Head elevation > 30 degrees. 2. The use of stress ulcer prophylaxis. 3. The use of deep vein thrombosis prophylaxis. 4. Daily interruption of sedation.



Criteria	:	Inclusion: 1. All patients on invasive mechanical ventilation in General ICU. Exclusion: NA
Type of indicator	:	Rate-based process indicator
Numerator	:	All patients on invasive mechanical ventilation and compliant to VCB bundle.
Denominator	:	Total number of patients on invasive mechanical ventilation
Formula	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$
Standard	:	≥ 95%
Data Collection	:	<ol style="list-style-type: none"> Where: Data will be collected in General ICU or wards that cater the above condition. Who: Data will be collected by Officer/ Paramedic/ Nurse in-charge (indicator co-ordinator) of the department/ unit. How frequent: Monthly data collection. Who should verify: All performance data must be verified by Head of Department/ Head of Unit/ Hospital Director. How to collect: Data is suggested to be collected from record book/ audit report from the audit conducted by the Department/ Hospital (refer to KPI MOH Guidelines).
Remarks	:	It is suggested that 25% sampling is applied to the total number of patients. Sample taken for 3 days per month at 8am.

Indicator 3	:	Departmental
Discipline	:	Anaesthesiology (General)
Name of indicator	:	Percentage of elective surgical cancellations after pre-operative assessment in the Anaesthetic Clinic
Dimension of Quality	:	Customer
Rationale	:	The effectiveness of the anaesthetic clinic should reflect in the reduced rate of cancellation due to anaesthetic reasons for elective surgeries and hence, increased customer satisfaction.
Definition of Terms	:	The definition on certain/ important clinical term (explaining the above indicator).
Criteria	:	Inclusion: <ol style="list-style-type: none"> Cancellation by Anaesthetic Team Cancellation due to anaesthetic and/ or medical reasons such as uncontrolled diabetes, hypertension, heart disease etc. Exclusion: <ol style="list-style-type: none"> Lack of ICU bed. URTI. Lack of OT time. Mechanical and electrical problem. Operation is cancelled by surgeon.
Type of indicator	:	Rate-based process indicator



Numerator	:	Number of elective surgical cancellations after pre-operative assessment in the Anaesthetic Clinic
Denominator	:	Total number of pre-operative assessment performed in the Anaesthetic Clinic
Formula	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$
Standard	:	≤ 5%
Data Collection	:	<ol style="list-style-type: none"> Where: Data will be collected in Anaesthetic clinic. Who: Data will be collected by Officer/ Nurse in-charge (indicator co-ordinator) of the department/ unit. How frequent: Monthly data collection. Who should verify: All performance data must be verified by Head of Department/ Head of Unit/ Hospital Director. How to collect: Data is suggested to be collected from record book (refer to KPI MOH Guidelines).
Remarks	:	