



CLINICAL GENETIC				
NO	INDICATOR	DIMENSION	STANDARD	HOSPITAL REPORTING FREQUENCY
1	Percentage of patients with waiting time of $\leq 90$ minutes to see the doctor at Genetic Clinic	Customer	$\geq 90\%$	3 Monthly
2	Percentage of patients with intoxication type IEM with $> 3$ admission in a year for metabolic decompensation	Effectiveness	$\leq 5\%$	Yearly
3	Percentage of patients with Marfan Syndrome and Tuberous Sclerosis who are compliant to the care pathway	Safety	$\geq 90\%$	3 Monthly



Indicator 1	:	Departmental
Discipline	:	Clinical Genetic
Name of indicator	:	Percentage of patients with waiting time of ≤ 90 minutes to see the doctor at Genetic Clinic
Dimension of Quality	:	Customer Focus
Rationale	:	Patient focused services must be given priority with prompt attention to patients' need by reducing waiting time for consultation
Definition of Terms	:	Time of registration to the time the patient is first seen by the doctor.
Criteria	:	<p><b>Inclusion:</b></p> <ol style="list-style-type: none"> <li>All patients with an appointment</li> </ol> <p><b>Exclusion:</b></p> <ol style="list-style-type: none"> <li>Patients that need to do a procedure on the same day before seeing the doctor (e.g. ultrasound/ x-ray)</li> <li>Patients with appointment at another Department on the same day</li> </ol>
Type of indicator	:	Process
Numerator	:	No. of patients seen within 90 minutes of appointment
Denominator	:	Total no. of patient seen in the clinic
Formula	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$
Standard	:	≥ 90%
Data Collection	:	<ol style="list-style-type: none"> <li><b>Where:</b> Data will be collected in Genetic Clinic</li> <li><b>Who:</b> Data will be collected by Officer/ Paramedic/ Nurse in-charge (indicator coordinator) of the department</li> <li><b>How frequent:</b> 3 Monthly data collection.</li> <li><b>Who should verify:</b> All performance data must be verified by Head of Department/ Head of Unit/ Hospital Director.</li> <li><b>How to collect:</b> 25% sampling to be collected from record book/ clinic appointment list.</li> </ol>
Remarks	:	

Indicator 2	:	Departmental
Discipline	:	Clinical Genetic
Name of indicator	:	Percentage of patients with intoxication type IEM with > 3 admission in a year for metabolic decompensation
Dimension of Quality	:	Clinical Effectiveness
Rationale	:	Frequent metabolic decompensation is significantly associated with suboptimal baseline metabolic control which reflects the outcome of outpatient care.
Definition of Terms	:	Intoxication type inborn error of metabolism (IEM) are urea cycle disorder (NAGS, OTC, CPS1, ASS, ASA, Arginase deficiencies), organic acidurias (PA, MMA, IVA) and maple syrup urine disease
Criteria	:	<p><b>Inclusion:</b> All patients with intoxication type IEM on follow up</p> <p><b>Exclusion:</b> NA</p>
Type of indicator	:	Outcome
Numerator	:	No. of patients with intoxication type IEM with >3 admissions in a year for



	:	metabolic decompensation
<b>Denominator</b>	:	Total no. of patients with intoxication type IEM on follow up
<b>Formula</b>	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$
<b>Standard</b>	:	$\leq 5\%$
<b>Data Collection</b>	:	<ol style="list-style-type: none"> <li><b>Where:</b> Data will be collected in Genetic Clinic/ wards that cater for the above condition.</li> <li><b>Who:</b> Data will be collected by Officer/ Paramedic/ Nurse in-charge (indicator coordinator) of the department</li> <li><b>How frequent:</b> Yearly data collection.</li> <li><b>Who should verify:</b> All performance data must be verified by Head of Department/ Head of Unit/ Hospital Director.</li> <li><b>How to collect:</b> Full data will be collected from Genetic Clinic database/ ward admission records</li> </ol>
<b>Remarks</b>	:	

<b>Indicator 3</b>	:	Departmental
<b>Discipline</b>	:	Clinical Genetic
<b>Name of indicator</b>	:	Percentage of patients with Marfan Syndrome and Tuberous Sclerosis who are compliant to the care pathway
<b>Dimension of Quality</b>	:	Safety
<b>Rationale</b>	:	For the provision of effective and standardised safe care. Complications from these genetic disorders may not be preventable but adherence to the care pathway ensure early/ pre-symptomatic detection to enable optimal treatment of these complication e.g. lens dislocation, aortic rupture, tumours in the brain, kidneys etc.
<b>Definition of Terms</b>	:	Care pathways are evidence based guidelines for the management of multisystemic genetic disorders.
<b>Criteria</b>	:	<b>Inclusion:</b> All patients attending the Marfan and Tuberous Sclerosis clinic  <b>Exclusion:</b> NA
<b>Type of indicator</b>	:	Outcome
<b>Numerator</b>	:	No. of patients compliant to the care pathways
<b>Denominator</b>	:	Total no. of patients attending the Marfan and Tuberous Sclerosis clinics
<b>Formula</b>	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$
<b>Standard</b>	:	$\geq 90\%$
<b>Data Collection</b>	:	<ol style="list-style-type: none"> <li><b>Where:</b> Data will be collected in Genetic Clinic</li> <li><b>Who:</b> Data will be collected by Officer/ Paramedic/ Nurse in-charge (indicator coordinator) of the department</li> <li><b>How frequent:</b> 3 Monthly data collection.</li> <li><b>Who should verify:</b> All performance data must be verified by Head of Department/ Head of Unit/ Hospital Director.</li> <li><b>How to collect:</b> Full data will be collected form patients' records/ Marfan syndrome &amp; Tuberous Sclerosis clinic attendance list</li> </ol>
<b>Remarks</b>	:	Care pathway are certified by Clinical Genetic department