



GERIATRIC				
NO	INDICATOR	DIMENSION	STANDARD	HOSPITAL REPORTING FREQUENCY
1	Percentage of patients with waiting time of ≤ 90 minutes to see the health care worker at Geriatric clinic	Customer	$\geq 90\%$	3 Monthly
2	Percentage of patients undergoing comprehensive geriatric assessment (CGA) within (\leq) one week of admission to Geriatric ward	Customer	$\geq 90\%$	3 Monthly
3	Percentage of patients who have fallen undergoing comprehensive post-fall assessment or analysis within seven days of incident of fall in dedicated Geriatric ward.	Safety	$\geq 75\%$	3 Monthly



Indicator 1	:	Departmental
Discipline	:	Geriatric
Indicator	:	Percentage of patients with waiting time of ≤ 90 minutes to see the healthcare worker at Geriatric clinic
Dimension of Quality	:	Customer centeredness
Rationale	:	<ol style="list-style-type: none"> 1. Patient-centred services must give priority to prompt attention to patient needs by reducing waiting times for consultation. 2. It is the aim of the MOH to reduce the waiting times to a minimum in line with the Circular of the Director-General of Health Malaysia No. 6/2004 – Steps to Reduce the Waiting Time in MOH Facilities.
Definition of Terms	:	<p>Waiting time: Time of registration/ appointment (whichever is later) to the time patient is first seen by healthcare worker.</p> <p>Healthcare worker: Any member of the Geriatric Team that has the privileged to perform the assessment.</p>
Criteria	:	<p>Inclusion: NA</p> <p>Exclusion:</p> <ol style="list-style-type: none"> 1. Patients who request for a specific personnel. 2. Patients who come without an appointment (“walk-in” patients). 3. Patients that need to do procedures on the same day before seeing the doctors e.g. blood taking and ultrasound. 4. Patients with multiple appointments on the same day. 5. Patients slotted in for special consultation.
Type of indicator	:	Rate-based process indicator
Numerator	:	Number of patients with waiting time of ≤ 90 minutes to see the healthcare worker at Geriatric clinic
Denominator	:	Total number of patients seen at Geriatric clinic
Formula	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$
Standard	:	≥ 90%
Data Collection	:	<ol style="list-style-type: none"> 1. Where: Data will be collected in Geriatric Clinic. 2. Who: Data will be collected by Officer/ Nurse in-charge (indicator co-ordinator) of the department/ unit. 3. How frequent: 3 monthly data collection. 4. Who should verify: Data will be verified by Head of Department/ Head of Unit/ Hospital Director. 5. How to collect: Data is suggested to be collected from appointment book.
Remarks	:	

Indicator 2	:	Departmental
Discipline	:	Geriatric
Indicator	:	Percentage of patients undergoing comprehensive geriatric assessment (CGA) within (≤) one week of admission to Geriatric ward
Dimension of Quality	:	Customer centeredness
Rationale	:	1. Comprehensive geriatric assessment (CGA) has been proven to provide better diagnostic accuracy, functional outcome, affect or cognition and



		<p>reduced medication use in the older patient. An early interdisciplinary team review is important for planning management and intervention for elderly inpatients.</p> <p>2. References:</p> <ol style="list-style-type: none"> CGA: Handbook of Geriatric Medicine ISBN 978-983-43917-1-3 JKH Luk Using the comprehensive Geriatric Assessment Technique to assess elderly patients. HKMJ Vol 6 Mac 2000 : 95
Definition of Terms	:	<p>Comprehensive Geriatric Assessment (CGA): Multidimensional and multidisciplinary diagnostic instrument designed to evaluate as well as to manage elderly patients by collecting data on the identified medical, psychosocial and functional capabilities and limitations of elderly patients with the aim to maximize overall health with aging by:</p> <ol style="list-style-type: none"> Developing treatment and long-term follow-up plans. Arranging for primary care and rehabilitative services. Organizing and facilitating the intricate process of case management. Determining long-term care requirements and optimal placement. Making use of health care resources. <p>Geriatric ward: Ward or designated cubicles/ beds for geriatric patients.</p>
Criteria	:	<p>Inclusion:</p> <ol style="list-style-type: none"> All patients admitted to the Geriatric ward. <p>Exclusion:</p> <ol style="list-style-type: none"> Patients who are discharged/ transferred out within 7 days e.g. patients admitted for procedure/ short intervention period (e.g. MRI, further investigation).
Type of indicator	:	Rate-based process indicator
Numerator	:	Number of patients undergoing comprehensive geriatric assessment (CGA) within (\leq) one week of admission to Geriatric ward
Denominator	:	Total number of patients admitted to Geriatric ward
Formula	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$
Standard	:	$\geq 90\%$
Data Collection	:	<ol style="list-style-type: none"> Where: Data will be collected in Geriatric wards or wards with designated cubicles/ beds for Geriatric patients. Who: Data will be collected by Officer/ Nurse in-charge (indicator co-ordinator) of the department/ unit. How frequent: 3 monthly data collection. Who should verify: Data will be verified by Head of Department/ Head of Unit/ Hospital Director. How to collect: Data is suggested to be collected from registration book.
Remarks	:	



Indicator 3	:	Departmental
Discipline	:	Geriatric
Indicator	:	Percentage of patients who have fallen undergoing comprehensive post-fall assessment or analysis within seven days of incident of fall in dedicated Geriatric ward.
Dimension of Quality	:	Safety
Rationale	:	1. Services policy 2. National (Services)- Malaysian patients safety goal (no.9) 3. International need.
Definition of Terms	:	Standard definition of fall: A fall is a sudden, unintentional change in position causing an individual to land at a lower level. (<i>WHO Jan, 2018</i>) Geriatric ward: Ward or designated cubicles/ beds for geriatric patients.
Criteria	:	Inclusion: 1. All patients admitted to the dedicated Geriatric ward. 2. Dedicated ward must have a in-house Geriatrician Exclusion: 1. Secondary to seizure(s), paralysis or overwhelming external force.
Type of indicator	:	Rate-based process indicator
Numerator	:	Number of incidence of falls for which post-falls assessment have been done
Denominator	:	Number of incidence of falls
Formula	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$
Standard	:	$\geq 75\%$
Data Collection	:	1. Where: Data will be collected in Geriatric wards or wards with designated cubicles/ beds for Geriatric patients. 2. Who: Data will be collected by Officer/ Nurse in-charge (indicator co-ordinator) of the department/ unit. 3. How frequent: 3 monthly data collection. 4. Who should verify: Data will be verified by Head of Department/ Head of Unit/ Hospital Director. 5. How to collect: Data is suggested to be collected from patient's case note/ check list.
Remarks	:	