



دائرة الصحة
DEPARTMENT OF HEALTH

Outpatient Rehabilitation Service Jawda Guidance

Version 1

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Executive Summary

The Department of Health– Abu Dhabi (DOH) is the regulatory body of the healthcare sector in the Emirate of Abu Dhabi and ensures excellence in healthcare for the community by monitoring the health status of its population.

The Emirate of Abu Dhabi is experiencing a substantial growth in the number of hospitals, centers and clinics. This is ranging from school clinics and mobile units to internationally renowned specialist and tertiary academic centers. Access to and quality of care have improved significantly over the past two decades, reflecting the economic growth and population expansion of the Emirate of Abu Dhabi; however, challenges remain in achieving further improvements.

The main challenges that are presented with increasingly dynamic population with increased expectation for treatment, utilization of technology and diverse workforce leading to increased complexity of healthcare provision in Abu Dhabi. All of this results in an increased and inherent risk to quality and patient safety.

DOH has developed dynamic and comprehensive quality framework in order to bring about improvements across the health sector. This guidance pertains to the quality indicators that the Department of Health (DOH) is requiring for quarterly reporting by all Outpatient Rehabilitation providers in Abu Dhabi.

The guidance sets out the full definition and method of calculation for clinical effectiveness indicators. For enquiries about this guidance, please contact jawda@DoH.gov.ae

This document is subjected for review and therefore it is advisable to utilize online versions available on the DOH at all times.

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About this Guidance

The guidance sets out the definitions and reporting frequency of JAWDA Outpatient Rehabilitation Service performance indicators. The Department of Health (DoH), with consultation from local and international expertise in the field, has developed Outpatient Rehabilitation Service performance indicators that are aimed for assessing the degree to which a provider competently and safely delivers the appropriate clinical services to the patient within the optimal period.

The Jawda KPI for Outpatient Rehabilitation Service in this guide include measures to monitor i.e. how well Outpatient Rehabilitation providers care for their patients, how often they follow best practices and how effective they are providing the treatments, and how patients feel about their experience at the providers. Healthcare providers are the most qualified professionals to develop and evaluate quality of care for rehabilitation patients; therefore, it is crucial that clinicians retain a leadership position in defining performance among Outpatient Rehabilitation Service healthcare providers.

Who is this guidance for?

All DoH licensed healthcare facilities providing Outpatient Rehabilitation Service in the Emirate of Abu Dhabi.

How do I follow this guidance?

Each provider will nominate one member of staff to coordinate, collect and monitor quality indicators. Outpatient Rehabilitation provider is required to submit quarterly submission of data through Jawda e-notification system.

Note: Jawda team may use centrally collected claim data submitted by healthcare providers through Shafafiya portal to validate the data submitted by the providers through Jawda portal.

What is the Regulation related to this guidance?

- Legislation establishing the Health Sector
- As per DoH [Policy for Quality and Patient Safety](#) issued January 15th 2017, this guidance applies to all DoH Licensed Hospital Healthcare Facilities in the Emirate of Abu Dhabi in accordance with the requirements set out in this Standard.

Outpatient Rehabilitation Service JAWDA Performance Indicators

Type: Outpatient Rehabilitation Service

Number: REH001

KPI Description (title):	Pain Reduction Rate Among Outpatients With Musculoskeletal And Orthopedic Conditions Receiving Physiotherapy Or Occupational Therapy
Domain	Effectiveness
Indicator Type	Outcome
Definition	<p>Percentage of outpatients (aged 12 years and above) receiving physiotherapy or occupational therapy that are achieving pain reduction ≥ 2-point in Numerical Rating Scale (NRS) or the equivalent in Visual Analog Scale (VAS) upon reaching 42 days reassessment or at discharge.</p> <p>Report Separately Numerator and Denominator for the following clusters:</p> <ul style="list-style-type: none"> • Patients with Musculoskeletal conditions • Patients with Orthopedic conditions
Calculation	<p>Numerator: Number of patients in the denominator, achieving pain reduction ≥ 2-point in Numerical Rating Scale (NRS) or the equivalent in Visual Analog Scale (VAS) between baseline and follow-up or discharge assessment within the reporting period.</p> <p>Numerator Inclusion: At reassessment every 42 days (done in the measurement quarter) (or) At discharge from service/end of treatment, whichever comes first.</p> <p>Numerator Guidance:</p> <ul style="list-style-type: none"> • <i>Patients with no documentation of assessment (reassessment not done in the measurement quarter) will not be counted in the numerator.</i> • <i>When multiple reassessments occur within one quarter, consider the latest.</i> <p>Denominator: Total number of outpatient (aged 12 years and above) receiving physiotherapy or occupational therapy, who had a documented baseline pain score using Numerical Rating Scale (NRS) or Visual Analog Scale (VAS) before initiating therapy AND reached the 42-day scheduled reassessment point or discharge assessment during the reporting quarter.</p> <p>Denominator Inclusion:</p> <ul style="list-style-type: none"> • Patients with musculoskeletal and/or orthopedic conditions • Patients who were discharged or completed a recommended course of therapy for less than 42 days. • Patients who are on current therapy course and reached the 42 days reassessment. <p>Denominator Exclusion:</p> <ul style="list-style-type: none"> • Patients refusing to complete or comply with the recommended treatment • Patients with a baseline score of ≤ 1 in NRS or equivalent in VAS

Outpatient Rehabilitation Service JAWDA Performance Indicators

Reporting Frequency	Quarterly
Unit Measure	Percentage (%)
International comparison if available	Developed internally based on recommendations by subject matter experts (SMEs), align with best practices from the International Association for the Study of Pain (IASP), Initiative on Methods, Measurement, and Pain Assessment in Clinical Trials (IMMPACT), International Consortium for Health Outcomes Measurement (ICHOM), American Physical Therapy Association (APTA), and The Joint Commission (TJC), adapted for local use.
Desired Direction	≥70%
Data Source	<ul style="list-style-type: none"> Electronic Medical Record (EMR)

Type: Outpatient Rehabilitation Service

Number: REH002

KPI Description (title):	Muscle Strength Improvement Among Selected Rehabilitation Outpatients Receiving Physiotherapy Or Occupational Therapy
Domain	Effectiveness
Indicator Type	Outcome
Definition	<p>Percentage of outpatients (all ages) receiving physiotherapy or occupational therapy that are achieving >1 clinically significant improvement in muscle strength upon reaching reassessment point or at discharge.</p> <p>Report Separately Numerator and Denominator for the following clusters:</p> <ul style="list-style-type: none"> Patients with Musculoskeletal conditions (42 days improvement) Patients with Orthopedic conditions (42 days improvement) Patients with Neurological conditions (84 days improvement)
Calculation	<p>Numerator: Number of patients in the denominator, achieving >1 clinically significant improvement in muscle strength between baseline and follow-up or discharge assessment within the reporting period.</p> <p>Numerator Inclusion: At reassessment every 42 days for patients with Musculoskeletal and/or Orthopedic conditions (done in the measurement quarter) At reassessment every 84 days for patients with Neurological conditions (done in the measurement quarter) (or) At discharge from service/end of treatment, whichever comes first.</p> <p>Numerator Guidance:</p> <ul style="list-style-type: none"> <i>Patients with no documentation of assessment (reassessment not done in the measurement quarter) will not be counted in the numerator.</i> <i>When multiple reassessments occur within one quarter, consider the latest.</i> <p>Denominator: Total number of outpatient (all ages) receiving physiotherapy or occupational therapy, who had a documented baseline in musculoskeletal assessment before initiating therapy AND reached the scheduled reassessment point or discharge assessment during the reporting quarter.</p>

Outpatient Rehabilitation Service JAWDA Performance Indicators

	<p><u>Denominator Inclusion:</u></p> <ul style="list-style-type: none"> • Patients with musculoskeletal, orthopedic and/or neurological conditions • Patients who were discharged or completed earlier than their recommended course of therapy • Patients with musculoskeletal and/or orthopedic conditions that are on current therapy course and reached the 42 days reassessment point • Patients with neurological conditions that are on current therapy course and reached the 84 days reassessment point <p><u>Denominator Exclusion:</u></p> <ul style="list-style-type: none"> • Patients refusing to complete or comply with the recommended treatment • Patients with no muscle strength deficits
Reporting Frequency	Quarterly
Unit Measure	Percentage (%)
International comparison if available	Developed internally based on recommendations by subject matter experts (SMEs), align with Evidence-Based Physiotherapy Outcome Measures from the International Consortium for Health Outcomes Measurement (ICHOM), American Physical Therapy Association (APTA)
Desired Direction	≥70%
Data Source	<ul style="list-style-type: none"> • Electronic Medical Record (EMR)

Outpatient Rehabilitation Service JAWDA Performance Indicators

Type: Outpatient Rehabilitation Service

Number: REH003

KPI Description (title):	Dynamic Standing Balance Improvement Among Adult Outpatients with Neurological Conditions Receiving Physiotherapy
Domain	Effectiveness
Indicator Type	Outcome
Definition	Percentage of adult (18 age and above) outpatients with neurological conditions receiving physiotherapy that are achieving improvement of ≥ 3.7 cm in Functional Reach Test upon reaching 42 days reassessment or at discharge.
Calculation	<p><u>Numerator:</u> Number of patients in the denominator, achieving ≥ 3.7cm improvement in Functional Reach Test between baseline and follow-up or discharge assessment within the reporting period.</p> <p><u>Numerator Inclusion:</u> At reassessment every 42 days (done in the measurement quarter) (or) At discharge from service/end of treatment, whichever comes first.</p> <p><u>Numerator Guidance:</u></p> <ul style="list-style-type: none"> • <i>Patients with no documentation of assessment (reassessment not done in the measurement quarter) will not be counted in the numerator.</i> • <i>When multiple reassessments occur within one quarter, consider the latest.</i> <p><u>Denominator:</u> Total number of adult (18 age and above) outpatients with neurological conditions receiving physiotherapy, who had a documented baseline in Functional Reach Test before initiating therapy AND reached the 42-day scheduled reassessment point or discharge assessment during the reporting quarter.</p> <p><u>Denominator Inclusion:</u></p> <ul style="list-style-type: none"> • Patients who were discharged or completed earlier than their recommended course of therapy • Patients who are on current therapy course and reached the 42 days reassessment point <p><u>Denominator Exclusion:</u></p> <ul style="list-style-type: none"> • Patients refusing to complete or comply with the recommended treatment • Patients who are unable to stand independently
Reporting Frequency	Quarterly
Unit Measure	Percentage (%)
International comparison if available	Developed internally based on recommendations by subject matter experts (SMEs), aligned with Ivan Miguel Pires, Garcia NM, Eftim Zdravevski. Measurement of Results of Functional Reach Test with Sensors: A Systematic Review. Electronics [Internet]. 2020 Jun 30 [cited 2024 Feb 6];9(7):1078–8.
Desired Direction	$\geq 70\%$
Data Source	<ul style="list-style-type: none"> • Electronic Medical Record (EMR)

Outpatient Rehabilitation Service JAWDA Performance Indicators

Type: Outpatient Rehabilitation Service

Number: REH004

KPI Description (title):	Functional Mobility Improvement on Timed Up and Go Test (TUG) Among Adult Ambulatory Rehabilitation Outpatients with Neurological Conditions
Domain	Effectiveness
Indicator Type	Outcome
Definition	<p>Percentage of adult (18 age and above) ambulatory neurological rehabilitation outpatients achieving improvement of >2.9 seconds in Functional Mobility Improvement using Timed Up and Go Test (TUG) upon reaching 60 days reassessment or at discharge.</p> <p><i>Ambulatory</i> neurological rehabilitation patients are defined as individuals with any level of walking ability, with or without assistance, who continue to require rehabilitation to address measurable deficits in mobility, balance, or functional independence.</p>
Calculation	<p><u>Numerator:</u> Number of patients in the denominator, achieving >2.9 seconds improvement in Functional Mobility Improvement using Timed Up and Go Test (TUG) between baseline and follow-up or discharge assessment within the reporting period.</p> <p><u>Numerator Inclusion:</u> At reassessment every 60 days (done in the measurement quarter) (or) At discharge from service/end of treatment, whichever comes first.</p> <p><u>Numerator Guidance:</u></p> <ul style="list-style-type: none"> • <i>Patients with no documentation of assessment (reassessment not done in the measurement quarter) will not be counted in the numerator.</i> • <i>When multiple reassessments occur within one quarter, consider the latest.</i> <p><u>Denominator:</u> Total number of adult (18 age and above) ambulatory neurological rehabilitation outpatients who had a documented baseline in Functional Mobility Improvement using Timed Up and Go Test (TUG) before initiating therapy AND reached the 60-day scheduled reassessment point or discharge assessment during the reporting quarter.</p> <p><u>Denominator Inclusion:</u></p> <ul style="list-style-type: none"> • Patients who were discharged or completed earlier than their recommended course of therapy • Patients who are on current therapy course and reached the 60 days reassessment point <p><u>Denominator Exclusion:</u></p> <ul style="list-style-type: none"> • Patients refusing to complete or comply with the recommended treatment • Patients who are non-ambulatory (e.g. bedbound), require total physical support to stand or walk

Outpatient Rehabilitation Service JAWDA Performance Indicators

	<ul style="list-style-type: none"> Patients who are having cognitive or behavioral barriers to safe test completion.
Reporting Frequency	Quarterly
Unit Measure	Percentage (%)
International comparison if available	<p>Developed internally based on recommendations by subject matter experts (SMEs), and aligned with published evidence and international evidence-based practices, including the following resources:</p> <ul style="list-style-type: none"> Shumway-Cook A, Brauer S, Woollacott M. Predicting the probability for falls in community-dwelling older adults using the Timed Up & Go Test. <i>Physical therapy</i>. 2000 Sep 1;80(9):896-903 PMC: TUG change in stroke patients—MDC 2.9 to 3.5 seconds CMS IRF-QM Manual Functional Ambulation Category—StrokEngine
Desired Direction	Higher is better
Data Source	<ul style="list-style-type: none"> Electronic Medical Record (EMR)

Outpatient Rehabilitation Service JAWDA Performance Indicators

Type: Outpatient Rehabilitation Service

Number: REH005

KPI Description (title):	Goal Attainment Scale (GAS) Improvement Among Pediatric Rehabilitation Outpatients
Domain	Effectiveness
Indicator Type	Outcome
Definition	Percentage of pediatric (less than 18 age) rehabilitation outpatients achieving ≥ 0 (expected outcome or better) on their functional rehabilitation goals using Goal Attainment Scaling (GAS) upon reaching 42 days reassessment or at discharge.
Calculation	<p>Numerator: Number of patients in the denominator, achieving ≥ 0 or (expected outcome or better) for their functional goal in Goal Attainment Scaling (GAS) between baseline and follow-up or discharge assessment within the reporting period.</p> <p>Numerator Inclusion: At reassessment every 42 days (done in the measurement quarter) (or) At discharge from service/end of treatment, whichever comes first.</p> <p>Numerator Guidance:</p> <ul style="list-style-type: none"> • <i>Patients with no documentation of assessment (reassessment not done in the measurement quarter) will not be counted in the numerator.</i> • <i>When multiple reassessments occur within one quarter, consider the latest.</i> <p>Denominator: Total number of pediatric (less than 18 age) rehabilitation outpatients who had a documented baseline in Goal Attainment Scaling (GAS) before initiating therapy AND reached the 42-day scheduled reassessment point or discharge assessment during the reporting quarter.</p> <p>Denominator Inclusion:</p> <ul style="list-style-type: none"> • Patients who were discharged or completed earlier than their recommended course of therapy • Patients who are on current therapy course and reached the 42 days reassessment point <p>Denominator Exclusion:</p> <ul style="list-style-type: none"> • Patients refusing to complete or comply with the recommended treatment
Reporting Frequency	Quarterly
Unit Measure	Percentage (%)
International comparison if available	Developed internally in alignment with AHRQ Quality Indicator methodology and CARF outcomes-focused approach, utilizing standardized and validated clinical outcome tools
Desired Direction	$\geq 75\%$ (baseline-dependent)
Data Source	<ul style="list-style-type: none"> • Electronic Medical Record (EMR)

Outpatient Rehabilitation Service JAWDA Performance Indicators

Type: Outpatient Rehabilitation Service

Number: REH006

KPI Description (title):	Communication or Swallowing Outcome Improvement Among Outpatients Receiving Speech & Language Therapy
Domain	Effectiveness
Indicator Type	Outcome
Definition	Percentage of outpatients (all ages) receiving speech & language therapy that are achieving ≥ 0.5 improvement in communication or swallowing outcome using Therapy Outcome Measures (TOMS) upon reaching 90 days reassessment or at discharge.
Calculation	<p><u>Numerator:</u> Number of patients in the denominator, achieving ≥ 0.5 improvement in communication or swallowing outcome using Therapy Outcome Measures (TOMS) between baseline and follow-up or discharge assessment within the reporting period.</p> <p><u>Numerator Inclusion:</u> At reassessment every 90 days (done in the measurement quarter) (or) At discharge from service/end of treatment, whichever comes first.</p> <p><u>Numerator Guidance:</u></p> <ul style="list-style-type: none"> • <i>Patients with no documentation of assessment (reassessment not done in the measurement quarter) will not be counted in the numerator.</i> • <i>When multiple reassessments occur within one quarter, consider the latest.</i> <p><u>Denominator:</u> Total number of outpatients (all ages) receiving speech & language therapy, who had a documented baseline in communication or swallowing using Therapy Outcome Measures (TOMS) before initiating therapy AND reached the 90-day scheduled reassessment point or discharge assessment during the reporting quarter.</p> <p><u>Denominator Inclusion:</u></p> <ul style="list-style-type: none"> • Patients who were discharged or completed earlier than their recommended course of therapy • Patients who are on current therapy course and reached the 90 days reassessment point <p><u>Denominator Exclusion:</u></p> <ul style="list-style-type: none"> • Patients refusing to complete or comply with the recommended treatment
Reporting Frequency	Quarterly
Unit Measure	Percentage (%)
International comparison if available	Developed internally in alignment with UK NHS RCSLT Outcome Measurement Guidance – Clinical Meaningfulness of TOMS, and the CARF outcomes-focused approach
Desired Direction	$\geq 70\%$
Data Source	<ul style="list-style-type: none"> • Electronic Medical Record (EMR)

Outpatient Rehabilitation Service JAWDA Performance Indicators

Type: Outpatient Rehabilitation Service

Number: REH007

KPI Description (title):	Dizziness Handicap Inventory (DHI) Improvement Among Adult Outpatients Receiving Vestibular Rehabilitation
Domain	Effectiveness
Indicator Type	Outcome
Definition	Percentage of adult outpatients (18 age and above) receiving vestibular rehabilitation that are achieving dizziness reduction ≥ 18 -point in Dizziness Handicap Inventory (DHI) upon reaching 42 days reassessment or at discharge.
Calculation	<p>Numerator: Number of patients in the denominator, achieving dizziness reduction ≥ 18-point in Dizziness Handicap Inventory (DHI) between baseline and follow-up or discharge assessment within the reporting period.</p> <p>Numerator Inclusion: At reassessment every 42 days (done in the measurement quarter) (or) At discharge from service/end of treatment, whichever comes first.</p> <p>Numerator Guidance:</p> <ul style="list-style-type: none"> • <i>Patients with no documentation of assessment (reassessment not done in the measurement quarter) will not be counted in the numerator.</i> • <i>When multiple reassessments occur within one quarter, consider the latest.</i> <p>Denominator: Total number of adult outpatients (18 age and above) receiving Vestibular Rehabilitation, who had a documented baseline score of Dizziness Handicap Inventory (DHI) before initiating therapy AND reached the 42-day scheduled reassessment point or discharge assessment during the reporting quarter.</p> <p>Denominator Inclusion:</p> <ul style="list-style-type: none"> • Patients who were discharged or completed earlier than their recommended course of therapy • Patients who are on current therapy course and reached the 42 days reassessment point <p>Denominator Exclusion:</p> <ul style="list-style-type: none"> • Patients refusing to complete or comply with the recommended treatment
Reporting Frequency	Quarterly
Unit Measure	Percentage (%)
International comparison if available	Developed internally based on recommendations by subject matter experts (SMEs) in alignment with Rehab Measures Database: Dizziness Handicap Inventory (DHI), Shirley Ryan Ability Lab (2023)
Desired Direction	$\geq 70\%$
Data Source	<ul style="list-style-type: none"> • Electronic Medical Record (EMR)

Outpatient Rehabilitation Service JAWDA Performance Indicators

Type: Outpatient Rehabilitation Service

Number: REH008

KPI Description (title):	6-Minute Walk Test (6MWT) Improvement in Meters (Median Change) Among Adult Outpatients Receiving Cardiorespiratory Rehabilitation.
Domain	Effectiveness
Indicator Type	Outcome
Definition	Measures the median change in walking distance (in meters) achieved by adult (18 age and above) outpatients receiving cardiorespiratory rehabilitation, upon reaching 42 days reassessment or at discharge.
Calculation	<p>Inclusion: Total number of adult outpatients (18 age and above) receiving Cardiorespiratory Rehabilitation, who had a documented baseline in 6-Minute Walk Test (6MWT) before initiating therapy AND reached the 42-day scheduled reassessment point or discharge assessment during the reporting quarter.</p> <p>Guidance:</p> <ul style="list-style-type: none"> • <i>Patients who are on current therapy course and reached the 42 days reassessment point</i> • <i>Included patients who were discharged or completed earlier than their recommended course of therapy</i> • <i>Patients with no documentation of assessment (reassessment not done in the measurement quarter) will not be counted in the numerator.</i> • <i>When multiple reassessments occur within one quarter, consider the latest.</i> <p>Exclusion: Patients refusing to complete or comply with the recommended treatment</p> <p>Formula: For each eligible patient, subtract the baseline 6MWT distance from the discharge 6MWT distance.</p> <p style="text-align: center;"><i>Median (across all qualifying patients)</i> = Discharge or reassessment meters – Baseline meters</p>
Reporting Frequency	Quarterly
Unit Measure	Meters (median value)
International comparison if available	Developed internally based on recommendations by subject matter experts (SMEs) in alignment with Rehab Measures Database: Promoting Patient-Centered Rehabilitation through Use of Standardized Assessments, Shirley Ryan Ability Lab (2023)
Desired Direction	≥14 meter from baseline
Data Source	<ul style="list-style-type: none"> • Electronic Medical Record (EMR)