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Clinical Quality Indicators using Australasian Pelvic Floor Procedure Registry clinical data

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Introduction The Australasian Pelvic Floor Procedure Registry (APFPR) was established to monitor the safety and quality of Stress Urinary Incontinence (SUI) and Pelvic Organ Prolapse (POP) procedures involving mesh or other pelvic floor prostheses.

Aims The APFPR has developed initial Clinical Quality Indicators (CQIs) to benchmark, inform and support improvements in quality of care. This presentation reports results from APFPR's first iteration of CQIs derived from its dataset. These CQIs aim to demonstrate APFPR's potential for supporting quality improvement.

Methods Potential CQIs were derived from process and outcome measures based on the Australian Commission on Safety and Quality in Health Care guidance, and the APFPR dataset. Inclusion and exclusion criteria were developed in conjunction with the APFPR Clinical Advisory Committee. A descriptive analysis of APFPR procedure data was undertaken. CQIs were reported for SUI, and POP with combined POP+SUI cohorts, and will be presented overall and as funnel plots.

Results As of 08 August 2023, the APFPR comprises approximately 500 patient procedures, with 23 participating sites reporting the following CQIs.

The proportion of initial patient procedures (SUI/POP) with:

- objective clinical assessments completed (90.2/91.8%)
- intraoperative cystoscopy performed (99.2/100%)
- improved patient outcomes (82.6/95.2%)
- the proportion of initial/subsequent patient procedures for SUI and POP with:
- a return to theatre (0.3/0%)
- readmission within 30 days (3.5/2%)
- catheterisation on discharge (5.2/0%).

Discussion The development of CQIs is an important milestone for the APFPR. Initial CQIs have been designed to capture common processes and outcomes. Further CQIs that incorporate patient-reported outcomes will be developed in 2024.

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