Quality standards in obstetric anesthesia - adherence to key indicators for quality improvement in obstetric units in the UK

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ObsQoR

Key Performance Indicators (KPIs)

KPIs relevant to obstetric anaesthesia

→ Outlined by the Obstetric Anaesthetists' Association and National Perinatal Epidemiology Unit

→ Intended to monitor the quality of care provision and facilitates national benchmarking of obstetric units across the UK

→ Adherence to these measures across UK institutions is currently unknown.

Bamber JH, et al. The identification of key indicators to drive quality improvement in obstetric anaesthesia: results of the Obstetric Anaesthetists' Association/National Perinatal Epidemiology Unit collaborative Delphi project. Anaesthesia. 2020;75(5):617-625

Quality of Recovery in Obstetric Anaesthesia (ObsQoR):

→ Multi-center study, 107 hospitals across the UK (October 2021)

→ Aimed to assess the quality of inpatient and outpatient recovery following childbirth

→ **Institutional survey** was a part of the study, examined aspects of organizational structure, service provision and standards of care.

→ Questions relating to KPIs relevant to obstetric anesthesia, patient safety, experience and outcome were included.

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Obstetric Anaesthetists' Association
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Survey Results

ObsQoR

Responses received from 106 sites (response rate 99%), representing 56% of the 194 obstetric units in the UK.

Key Performance Indicator

Institutional reporting and guideline availability	Centers that record the incidence of post-dural puncture headache (PDPH)?	75.5%
	Centers that record the percentage of epidurals for labor analgesia that achieve adequate pain relief within 45 minutes of placement?	13.5%
	Centers that have guidelines available for the antenatal referral of patients to see an anesthesiologist?	99%
Hematology testing capability and transfusion service	Point of care testing is available for estimating Hemoglobin value on the labor & delivery unit	88%
	O negative blood is available within 5 minutes of request	96%

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Results & Conclusions

ObsQoR

Staffing and infrastructure

Ninety centres (84.9%) reported having a dedicated anaesthetic antenatal clinic, of which 89 (98.9%) reported having local guidelines for patient referral.

Elective cesarean delivery cases are covered by a dedicated anesthesiologist who is ***not*** expected to also cover emergency cases elsewhere	76.4%
Elective cesarean delivery cases are covered by dedicated obstetric & operating room staff who are ***not*** expected to cover emergencies elsewhere	78.3%
There is at least one fully equipped and staffed operating room available within the labor & delivery unit.	100%

Conclusions: these results provide insight into current practices in quality, safety and care provision across a large number of UK obstetric centers. It identifies considerable variability in KPIs centered on the measurement and recording of PDPH and timely provision of adequate labor epidural analgesia.