A nationwide quality registry for DACPR performance and innovation for DACPR has never been explored. We designed an innovative structured measurement.

**Aim**
Following the guidelines of DACPR may enhance bystander CPR rate after OHCA. Registry of quality measurement for DACPR has never been explored. We designed a nationwide quality registry for DACPR performance and innovated a structured format of measurement.

**Method**
A nationwide Google Forms based online registry covering over twenty administrative regions and more than twenty millions of population was designed and launched for DACPR performance and quality measurement at individual case level for non-traumatic OHCA patient. Audio records of individual EMS call were reviewed for performance rating.

**Design**
System data inputted could be immediately retrieved as feedback to each corresponding administrative region. Recognition of cardiac arrest by call communication, CPR Instructions upon the recognised OHCA, and chest compression upon the recognised OHCA were the three major categorical performance indicators, and each operational time interval of call-to-recognition, call-to-instruction, and call-to-compression were evaluated. Each categorical performance indicator (Y axis) was paired with its operational time interval (X axis) as a set of quality index for diagrammatic comparison in our design. We used regression analysis for statistical analysis.

**Results**
A total of 5642 audio records for OHCA EMS calls across 17 regions were centralised into the nationwide DACPR Quality Registry in 6 months (minimal 40 to maximal 1622 cases/region according to its population). Regional recognition rate significantly varied from 10.0% to 65.5% (p<0.01; averaged 51.0%, SD 20.0%). Instruction rate varied from 41.3% to 95.0% (p<0.01; averaged 80.0%, SD 28.5%). Compression rate varied from 0% to 87.5% (p<0.01; averaged 54.0%, SD 23.6%). Averaged regional call-to-recognition time, call-to-instruction time, and call-to-compression time were 48 (SD 19), 84 (SD 42), and 185 (SD 114) seconds. The designated diagrammatic comparisons may indicate the administrative regions of better performance located at the upward and leftward dimension, and the ones of unsatisfied performance located at the downward and rightward dimension (diagrams will be illustrated).

**Conclusion**
We successfully innovated and launched a nationwide DACPR quality e-registry showing a wide variety of regional performance needing improvement. The designated diagram may easily indicate and compare the individual performance across the joint regions.

**Conflict of interest**
None

**Funding**
None