

# DSDP

**Day Surgery Data Project**  
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# Bedoeling

- Beoordelen - gegevens  
- indicatoren  
in verband met dagchirurgie  
in enkele landen in Europa  
vanuit 2 perspectieven
  - expert
  - empirisch

# Welke landen

- Verenigd Koninkrijk
- België
- Denemarken
- Frankrijk
- Italië
- Portugal
- Roemenië
- Hongarije

# Welke evaluatiecriteria

- Beschikbaarheid van een indicator
- Face validity = waargenomen capaciteit van een indicator om de zo juist mogelijke afspiegeling te zijn van de werkelijkheid of van een aspect ervan

# Categorieën van indicatoren(9)

- Inputs (middelen)
- Patientcharacteristics
- Access (toegangsmodaliteiten)
- Process
- Outputs (non conformiteiten)
- Outcome (resultaten)
- Safety (veiligheid)
- Satisfaction (tevredenheid/responsiviteit)
- Cost/Productivity

# Onderzoeksniveaus

- Nationaal
- Regionaal
- Hospitaal
- Chirurgisch dagcentrum (eenheid)

# Doel van de studie

- Aanbevelingen formuleren voor samenstellen van een essentiële en een ideale set van indicatoren voor dagchirurgie
- Bijdragen tot standardisatie van een Europees informatiesysteem ivm dagchirurgie

# Detailstudie

- voor elke indicator : graad van beschikbaarheid per niveau en in alle deelnemende landen
  
- voor elk indicator : opinie van de expert ivm de face validity



# Scatterplot



INDICATOR	CLASSIFICATION	Unit Index	Hospital Index	Regional Index	National Index	Face validity	Quadrant Unit	Quadrant Hospital	Quadrant Regional	Quadrant national
1. Number and % day surgery DS beds/total surgery beds	INPUTS	87.5%	87.5%	55.0%	55.0%	4.00	1	1	1	1
2. Full Time Equivalent Surgeons (including child surgeons) dedicated to DS	INPUTS	15.0%	37.5%	17.5%	5.0%	3.14	4	4	4	4
3. Providers dedicated to DS (total, public and private)	INPUTS	42.5%	52.5%	52.5%	27.5%	3.33	4	3	3	3
4. Number and % of DS units by public and private ownership, distinguishing between units financed by National Health Service/insurance and out of pocket disbursement	INPUTS	20.0%	20.0%	57.5%	30.0%	3.29	4	4	3	3
5. Number and % of available theatres and % time dedicated to DS	INPUTS	62.5%	62.5%	27.5%	15.0%	3.38	3	3	4	4
6. Ratio of staff to beds/trolleys/reclining chairs	INPUTS	62.5%	75.0%	30.0%	17.5%	3.57	3	3	3	4
7. Available computerized waiting list for DS patients	INPUTS	87.5%	75.0%	52.5%	40.0%	4.71	1	1	1	1
8. Available written protocols and procedures concerning patients:	INPUTS	75.0%	87.5%	45.0%	32.5%	4.83	1	1	1	1
9. Patients sex and average age	PATIENTS CHAR	90.0%	100.0%	77.5%	77.5%	4.00	1	1	1	1
10. Patients education level	PATIENTS CHAR	27.5%	37.5%	27.5%	15.0%	3.29	4	4	4	4
11. Average distance from patient's house to DS unit	ACCESS	50.0%	37.5%	27.5%	15.0%	3.38	4	4	4	4
12. Average waiting time for basket procedures in general and DS units	ACCESS	52.5%	52.5%	42.5%	55.0%	3.88	2	1	1	1
13. % of patients with standardized preoperative evaluation and tests:	PROCESS	37.5%	37.5%	15.0%	2.5%	3.38	4	4	4	4
14. % of patients assessed before day of procedure	PROCESS	50.0%	37.5%	30.0%	17.5%	3.71	4	4	3	4
15. % of patients given specific date/time at decision to admit	PROCESS	37.5%	37.5%	27.5%	15.0%	3.63	4	4	4	4
16. % of patients given individual appointments	PROCESS	40.0%	15.0%	20.0%	10.0%	3.29	4	4	4	4
17. % of patients reminded just before appointment	PROCESS	27.5%	25.0%	2.5%	2.5%	3.14	4	4	4	4
18. % of patients who have received a pre-anaesthesia assessment before DS	PROCESS	62.5%	50.0%	30.0%	5.0%	3.88	1	2	1	2
19. % patients with delays > 30' from time appointed for surgical procedure up to actual beginning	PROCESS	12.5%	12.5%	15.0%	2.5%	2.83	4	4	4	4
20. Mean operating time	PROCESS	50.0%	42.5%	7.5%	5.0%	4.38	2	2	2	2

INDICATOR	CLASSIFICATION	Unit Index	Hospital Index	Regional Index	National Index	Face validity	Quadrant Unit	Quadrant Hospital	Quadrant Regional	Quadrant national
21. Mean recovery room time	PROCESS	75.0%	87.5%	30.0%	17.5%	3.25	3	3	3	4
22. % patients accompanied by escort for discharge home and stay the first 24 hours, i.e. an adult to accompany the patient home and to be with them for the first 24-hours following surgery, and access to a functioning telephone at home	PROCESS	52.5%	40.0%	20.0%	7.5%	3.67	4	4	4	4
23. % patients discharged against medical advice	PROCESS	50.0%	37.5%	17.5%	17.5%	3.13	4	4	4	4
24. % patients with post operative follow up appointment with	PROCESS	55.0%	62.5%	30.0%	30.0%	3.63	3	3	3	3
25. % patients discharged with written	PROCESS	77.5%	75.0%	22.5%	7.5%	4.00	1	1	2	2
26. % patients assessed by "Readiness for discharge protocol" that includes:	PROCESS	77.5%	75.0%	30.0%	7.5%	3.33	3	3	3	4
27. Follow-up phone call after surgery at 24 h assessing	PROCESS	77.5%	40.0%	20.0%	7.5%	3.33	3	4	4	4
28. Survey of patients satisfaction carried out in last two years	PROCESS	62.5%	50.0%	15.0%	2.5%	4.25	1	2	2	2
29. Percentage of patients receiving anaesthesia care as day-stay surgery patients who have received a pre-anaesthesia assessment before the day of day surgery	PROCESS	32.5%	17.5%	20.0%	7.5%	2.83	4	4	4	4
30. Percentage of surgical patients who received prophylactic antibiotics consistent with current guidelines	PROCESS	40.0%	40.0%	30.0%	17.5%	3.25	4	4	3	4
31. Percentage of Ambulatory Surgery Center admissions with an order for a prophylactic antibiotic for prevention of surgical site infection, who receive the prophylactic antibiotic on time	PROCESS	27.5%	27.5%	17.5%	5.0%	3.00	4	4	4	4
32. Percentage of Ambulatory Surgery Center admissions with surgical site hair removal with clippers or depilatory cream	PROCESS	30.0%	30.0%	20.0%	7.5%	3.29	4	4	4	4
33. cancellations of surgical procedures with notification by the patient at least 24 hours before	OUTPUT	52.5%	40.0%	30.0%	5.0%	3.75	4	4	3	4
34. % cancellations of surgical procedures without notification by the patient ("failed to arrive" or "did not attend")	OUTPUT	65.0%	52.5%	30.0%	20.0%	4.25	1	1	1	1

INDICATOR	CLASSIFICATION	Unit Index	Hospital Index	Regional Index	National Index	Face validity	Quadrant Unit	Quadrant Hospital	Quadrant Regional	Quadrant national
35. cancellations of the booked procedure after arrival at the day surgery centre/unit	OUTPUT	77.5%	50.0%	17.5%	20.0%	4.25	1	2	2	1
36. % deviation of actual from planned procedures	OUTPUT	2.5%	0.0%	2.5%	2.5%	3.00	4	4	4	4
37. Number of interventions per type per year referred to the overall DS Unit	OUTPUT	90.0%	75.0%	65.0%	65.0%	4.38	1	1	1	1
38. Number of interventions per type per year per single surgeon	OUTPUT	90.0%	77.5%	40.0%	52.5%	3.33	3	3	3	3
39. Average Number of interventions per type per operative room per day	OUTPUT	77.5%	75.0%	40.0%	17.5%	3.14	3	3	3	4
40. % of elective surgery performed as day case in the structure (by basket and procedure)	OUTPUT	80.0%	90.0%	67.5%	35.0%	4.57	1	1	1	1
41. % of diagnostic and operative endoscopies carried out in DS	OUTPUT	90.0%	90.0%	70.0%	45.0%	3.86	1	1	1	1
42. % of DS discharges of residents of a given region/total DS discharges from same region	OUTPUT	27.5%	52.5%	55.0%	42.5%	3.57	4	3	3	3
43. % of surgery inpatient discharges/ all surgery discharges	OUTPUT	55.0%	90.0%	90.0%	70.0%	4.14	1	1	1	1
44. Rate of surgery inpatient discharge per 100.000 population/per diagnosis	OUTPUT	27.5%	37.5%	67.5%	67.5%	3.50	4	4	3	3
45. Number of day surgery discharge (per procedures)	OUTPUT	87.5%	100.0%	90.0%	90.0%	3.86	1	1	1	1
46. Percentage of day surgery discharge on all surgery discharge (per procedures)	OUTPUT	62.5%	87.5%	77.5%	90.0%	4.38	1	1	1	1
47. Rate of day surgery discharge per 100.000 population/per diagnosis (pre procedure)	OUTPUT	25.0%	50.0%	80.0%	67.5%	3.75	4	4	3	3
48. Age-standardized rate (hospitalizations by Procedure)	OUTPUT	37.5%	50.0%	70.0%	57.5%	3.83	4	4	3	3
49. Utilization of planned day surgery theatre sessions	OUTPUT	42.5%	40.0%	5.0%	5.0%	4.29	2	2	2	2
50. Mortality rate within 30 days of selected DS , for patients undergoing any of a "basket" of selected procedures on an elective basis	OUTCOME	27.5%	50.0%	40.0%	27.5%	4.63	2	2	1	1

INDICATOR	CLASSIFICATION	Unit Index	Hospital Index	Regional Index	National Index	Face validity	Quadrant Unit	Quadrant Hospital	Quadrant Regional	Quadrant national
51. Mean and variation of post-operative patient "functional health status" or "functional recovery index"	OUTCOME	65.0%	50.0%	20.0%	7.5%	3.63	3	4	4	4
52. Mean and variation of benefits gained 3-6 month from day surgery (PROM):	OUTCOME	15.0%	12.5%	2.5%	2.5%	3.50	4	4	4	4
53. Mean time to return to light activities of daily living	OUTCOME	2.5%	0.0%	2.5%	2.5%	3.63	4	4	4	4
54. Corrective operative procedures within 5 years	OUTCOME	2.5%	0.0%	2.5%	2.5%	3.50	4	4	4	4
55. Surgical and anesthesiological adverse events	SAFETY	45.0%	50.0%	30.0%	30.0%	4.43	2	2	1	1
56. Prolonged post-operative stay (time spent in the recovery area and unplanned delay in discharge)	SAFETY	30.0%	27.5%	5.0%	5.0%	3.17	4	4	4	4
57. Unplanned overnight admission	SAFETY	65.0%	67.5%	5.0%	17.5%	4.13	1	1	2	2
58. Unplanned return to the operation room	SAFETY	42.5%	30.0%	17.5%	20.0%	3.63	4	4	4	3
59. Unplanned re-admission to hospital or acute care facility	SAFETY	42.5%	50.0%	17.5%	20.0%	3.88	2	2	2	1
60. Percentage of Ambulatory Surgery Centre admissions requiring a hospital transfer or hospital admission upon discharge from the ASC	SAFETY	55.0%	32.5%	45.0%	35.0%	4.00	1	2	1	1
61. Number of patients contracting the MRSA superbug during the course of their treatment expressed as a percentage of percentage of day surgery activity	SAFETY	20.0%	22.5%	32.5%	20.0%	3.67	4	4	3	3
62. Percentage of Ambulatory Surgery Centre admissions who experienced a wrong site, wrong side, wrong patient, wrong procedure, or wrong implant	SAFETY	42.5%	55.0%	17.5%	20.0%	4.20	2	1	2	1
63. Percentage of Ambulatory Surgery Centre (ASC) admissions experiencing a fall within the confines of the ASC	SAFETY	45.0%	45.0%	10.0%	12.5%	3.50	4	4	4	4
64. % surgical wound infection	SAFETY	15.0%	52.5%	30.0%	17.5%	3.67	4	3	3	4
65. Rates of post-operative sepsis	SAFETY	27.5%	40.0%	30.0%	17.5%	3.71	4	4	3	4
66. Medication error	SAFETY	30.0%	15.0%	17.5%	20.0%	3.80	4	4	4	3

INDICATOR	CLASSIFICATION	Unit Index	Hospital Index	Regional Index	National Index	Face validity	Quadrant Unit	Quadrant Hospital	Quadrant Regional	Quadrant national
67. Percentage of staff who reported that in the last month they had seen any errors, near misses or incidents that could have hurt patients/service users	SAFETY	15.0%	12.5%	17.5%	17.5%	2.60	4	4	4	4
68. patients given a choice of admission date	SATISFACTION/RESPON SIVENESS	65.0%	52.5%	32.5%	20.0%	3.71	3	3	3	3
69. % patients who believe that DS has increased access to surgery	SATISFACTION/RESPON SIVENESS	40.0%	27.5%	17.5%	5.0%	3.57	4	4	4	4
70. % patients who consider waiting list is acceptable	SATISFACTION/RESPON SIVENESS	40.0%	27.5%	17.5%	17.5%	4.14	2	2	2	2
71. % patients who consider they have received good pre-operative information	SATISFACTION/RESPON SIVENESS	87.5%	52.5%	22.5%	20.0%	4.43	1	1	2	1
72. Number and % of patients satisfied with	SATISFACTION/RESPON SIVENESS	65.0%	52.5%	32.5%	20.0%	4.57	1	1	1	1
73. % of written complaints/total procedures	SATISFACTION/RESPON SIVENESS	65.0%	52.5%	20.0%	7.5%	4.13	1	1	2	2
74. % patients who consider post-operative pain control was good	SATISFACTION/RESPON SIVENESS	62.5%	27.5%	10.0%	10.0%	4.00	1	2	2	2
75. % patients who did not experience post-operative nausea and vomiting	SATISFACTION/RESPON SIVENESS	55.0%	40.0%	22.5%	22.5%	4.29	1	2	2	1
76. % patients who were explained medicines purpose	SATISFACTION/RESPON SIVENESS	65.0%	52.5%	35.0%	22.5%	4.29	1	1	1	1
77. % patients who consider the environment as courteous and friendly	SATISFACTION/RESPON SIVENESS	65.0%	40.0%	22.5%	10.0%	4.67	1	2	2	2
78. % patients who believe they were not discharged too early or in a rushed way	SATISFACTION/RESPON SIVENESS	52.5%	40.0%	22.5%	10.0%	4.50	2	2	2	2
79. % patients who received telephone follow-up contact on the next day	SATISFACTION/RESPON SIVENESS	75.0%	42.5%	10.0%	10.0%	4.50	1	2	2	2

INDICATOR	CLASSIFICATION	Unit Index	Hospital Index	Regional Index	National Index	Face validity	Quadrant Unit	Quadrant Hospital	Quadrant Regional	Quadrant national
80. % patients involved in decisions about their discharge	SATISFACTION/RESPONSIVENESS	62.5%	40.0%	22.5%	10.0%	4.00	1	2	2	2
81. % patients who received written information on who to contact if worried	SATISFACTION/RESPONSIVENESS	100.0%	52.5%	22.5%	10.0%	4.71	1	1	2	2
82. patients who reported that the doctors or nurses gave their family or someone close to them all the information they needed to help care for them	SATISFACTION/RESPONSIVENESS	75.0%	40.0%	32.5%	20.0%	4.67	1	2	1	1
83. % patients who believe their privacy was protected when	SATISFACTION/RESPONSIVENESS	27.5%	27.5%	17.5%	5.0%	4.14	2	2	2	2
84. % patients who judge	SATISFACTION/RESPONSIVENESS	62.5%	40.0%	20.0%	5.0%	4.00	1	2	2	2
85. Mean cost per hour of OP activity	COST/PRODUCTIVITY	52.5%	52.5%	45.0%	20.0%	4.50	2	1	1	1
86. Mean cost per selected procedure	COST/PRODUCTIVITY	52.5%	52.5%	45.0%	32.5%	4.63	2	1	1	1
87. Ratio of a unit's actual costs to the expected costs for the same case load at current tariffs	COST/PRODUCTIVITY	32.5%	30.0%	32.5%	20.0%	4.00	2	2	1	1
88. Expenditure on Day Surgery care as % of total health expenditure	COST/PRODUCTIVITY	35.0%	47.5%	37.5%	25.0%	4.20	2	2	1	1
89. % of theatre sessions utilized / planned sessions	COST/PRODUCTIVITY	65.0%	50.0%	5.0%	5.0%	4.14	1	2	2	2
90. % of theatre planned session / available sessions	COST/PRODUCTIVITY	65.0%	65.0%	20.0%	7.5%	4.29	1	1	2	2
91. % of full time equivalent staff days lost to sickness absence	COST/PRODUCTIVITY	40.0%	52.5%	32.5%	7.5%	3.86	2	1	1	2
92. Bed occupancy rate (inpatient and day surgery)	COST/PRODUCTIVITY	37.5%	87.5%	55.0%	42.5%	3.57	4	3	3	3
93. Average rate of rotation of the operating rooms	COST/PRODUCTIVITY	32.5%	57.5%	35.0%	12.5%	4.20	2	1	1	2
94. % Surgical theatre use: (Sum of patient time in the operating room during normal staffed hours/ Total number of hours staffed per local norms)	COST/PRODUCTIVITY	52.5%	55.0%	22.5%	10.0%	4.43	2	1	2	2
95. Average number of selected procedures per theatre session	COST/PRODUCTIVITY	40.0%	65.0%	22.5%	10.0%	3.83	4	3	4	4

# Vergelijking met UK

- indicatoren op niveau van het centrum
- indicatoren op nationaal niveau



INDICATOR	CLASSIFICATION	% yes	% no	% don't know	Belgium	Denmark	France	Italy	Portugal	Romania	England	Hungary	Index
1. Number and % day surgery DS beds/total surgery beds	INPUTS	87.5%	12.5%	0.0%									87.5%
5. Number and % of available theatres and % time dedicated to DS	INPUTS	62.5%	37.5%	0.0%									62.5%
6. Ratio of staff to beds/trolleys/reclining chairs	INPUTS	62.5%	37.5%	0.0%									62.5%
7. Available computerized waiting list for DS patients	INPUTS	87.5%	12.5%	0.0%									87.5%
8. Available written protocols and procedures concerning patients:	INPUTS	75.0%	25.0%	0.0%									75.0%
9. Patients sex and average age	PATIENTS CHAR	87.5%	0.0%	12.5%									90.0%
12. Average waiting time for basket procedures in general and DS units	ACCESS	50.0%	37.5%	12.5%									52.5%
20. Mean operating time	PROCESS	50.0%	50.0%	0.0%									50.0%
21. Mean recovery room time	PROCESS	75.0%	25.0%	0.0%									75.0%
26. % patients assessed by "Readiness for discharge protocol" that includes	PROCESS	75.0%	12.5%	12.5%									77.5%
27. Follow-up phone call after surgery at 24 h assessing	PROCESS	75.0%	12.5%	12.5%									77.5%
28. Survey of patients satisfaction carried out in last two years	PROCESS	62.5%	37.5%	0.0%									62.5%
34. % cancellations of surgical procedures without notification by the patient ("failed to arrive" or "did not attend")	OUTPUT	62.5%	25.0%	12.5%									65.0%
35. cancellations of the booked procedure after arrival at the day surgery centre/unit	OUTPUT	75.0%	12.5%	12.5%									77.5%
37. Number of interventions per type per year referred to the overall DS Unit	OUTPUT	87.5%	0.0%	12.5%									90.0%
38. Number of interventions per type per year per single surgeon	OUTPUT	87.5%	0.0%	12.5%									90.0%

Table 1: Comparison of Day Surgery indicators available at unit level in participating nations vs. England

INDICATOR	CLASSIFICATION	% yes	% no	% don't know	Belgium	Denmark	France	Italy	Portugal	Romania	England	Hungary	Index
41. % of diagnostic and operative endoscopies carried out in DS	OUTPUT	87.5%	0.0%	12.5%									90.0%
45. Number of day surgery discharge (per procedures)	OUTPUT	87.5%	12.5%	0.0%									87.5%
46. Percentage of day surgery discharge on all surgery discharge (per procedures)	OUTPUT	62.5%	37.5%	0.0%									62.5%
49. Utilization of planned day surgery theatre sessions	OUTPUT	37.5%	37.5%	25.0%									42.5%
55. Surgical and anesthesiological adverse events	SAFETY	37.5%	25.0%	37.5%									45.0%
57. Unplanned overnight admission	SAFETY	62.5%	25.0%	12.5%									65.0%
59. Unplanned re-admission to hospital or acute care facility	SAFETY	37.5%	37.5%	25.0%									42.5%
68. patients given a choice of admission date	SATISFACTION/RESPONSE	62.5%	25.0%	12.5%									65.0%
69. % patients who believe that DS has increased access to surgery	SATISFACTION/RESPONSE	37.5%	50.0%	12.5%									40.0%
70. % patients who consider waiting list is acceptable	SATISFACTION/RESPONSE	37.5%	50.0%	12.5%									40.0%
71. % patients who consider they have received good pre-operative information	SATISFACTION/RESPONSE	87.5%	12.5%	0.0%									87.5%
72. Number and % of patients satisfied with	SATISFACTION/RESPONSE	62.5%	25.0%	12.5%									65.0%
73. % of written complaints/total procedures	SATISFACTION/RESPONSE	62.5%	25.0%	12.5%									65.0%
74. % patients who consider post-operative pain control was good	SATISFACTION/RESPONSE	62.5%	37.5%	0.0%									62.5%
75. % patients who did not experience post-operative nausea and vomiting	SATISFACTION/RESPONSE	50.0%	25.0%	25.0%									55.0%
76. % patients who were explained medicines purpose	SATISFACTION/RESPONSE	62.5%	25.0%	12.5%									65.0%

Table 1: Comparison of Day Surgery indicators available at unit level in participating nations vs. England

INDICATOR	CLASSIFICATION	% yes	% no	% don't know	Belgium	Denmark	France	Italy	Portugal	Romania	England	Hungary	Index
77. % patients who consider the environment as courteous and friendly	SATISFACTION/RESPONSE	62.5%	25.0%	12.5%									65.0%
78. % patients who believe they were not discharged too early or in a rushed way	SATISFACTION/RESPONSE	50.0%	37.5%	12.5%									52.5%
79. % patients who received telephone follow-up contact on the next day	SATISFACTION/RESPONSE	75.0%	25.0%	0.0%									75.0%
80. % patients involved in decisions about their discharge	SATISFACTION/RESPONSE	62.5%	37.5%	0.0%									62.5%
81. % patients who received written information on who to contact if worried	SATISFACTION/RESPONSE	100.0%	0.0%	0.0%									100.0%
82. patients who reported that the doctors or nurses gave their family or someone close to them all the information they needed to help care for them	SATISFACTION/RESPONSE	75.0%	25.0%	0.0%									75.0%
83. % patients who believe their privacy was protected when	SATISFACTION/RESPONSE	25.0%	62.5%	12.5%									27.5%
84. % patients who judge	SATISFACTION/RESPONSE	62.5%	37.5%	0.0%									62.5%
89. % of theatre sessions utilized / planned sessions	COST/PRODUCTIVITY	62.5%	25.0%	12.5%									65.0%
90. % of theatre planned session / available sessions	COST/PRODUCTIVITY	62.5%	25.0%	12.5%									65.0%
91. % of full time equivalent staff days lost to sickness absence	COST/PRODUCTIVITY	37.5%	50.0%	12.5%									40.0%
94. % Surgical theatre use: (Sum of patient time in the operating room during normal staffed hours/ Total number of hours staffed per local norms)	COST/PRODUCTIVITY	50.0%	37.5%	12.5%									52.5%
95. Average number of selected procedures per theatre session	COST/PRODUCTIVITY	37.5%	50.0%	12.5%									40.0%

Table 1: Comparison of Day Surgery indicators available at unit level in participating nations vs. England

INDICATOR	CLASSIFICATION	% yes	% no	% don't know	Belgium	Denmark	France	Italy	Portugal	Romania	England	Hungary	Index
1. Number and % day surgery DS beds/total surgery beds	INPUTS	50.0%	25.0%	25.0%	Red	Green	Grey	Red	Green	Green	Green	Grey	55.0%
7. Available computerized waiting list for DS patients	INPUTS	37.5%	50.0%	12.5%	Red	Red	Red	Red	Green	Green	Green	Grey	40.0%
8. Available written protocols and procedures concerning patients:	INPUTS	25.0%	37.5%	37.5%	Red	Red	Red	Grey	Grey	Green	Green	Grey	32.5%
9. Patients sex and average age	PATIENTS CHAR	75.0%	12.5%	12.5%	Green	Green	Green	Red	Green	Green	Green	Grey	77.5%
12. Average waiting time for basket procedures in general and DS units	ACCESS	50.0%	25.0%	25.0%	Red	Green	Grey	Red	Green	Green	Green	Grey	55.0%
37. Number of interventions per type per year referred to the overall DS Unit	OUTPUT	62.5%	25.0%	12.5%	Green	Green	Red	Red	Green	Green	Green	Grey	65.0%
38. Number of interventions per type per year per single surgeon	OUTPUT	50.0%	37.5%	12.5%	Green	Red	Red	Red	Green	Green	Green	Grey	52.5%
45. Number of day surgery discharge (per procedures)	OUTPUT	87.5%	0.0%	12.5%	Green	Green	Green	Green	Green	Green	Green	Grey	90.0%
46. Percentage of day surgery discharge on all surgery discharge (per procedures)	OUTPUT	87.5%	0.0%	12.5%	Green	Green	Green	Green	Green	Green	Green	Grey	90.0%
55. Surgical and anesthesiological adverse events	SAFETY	25.0%	50.0%	25.0%	Red	Grey	Red	Red	Red	Green	Green	Grey	30.0%
57. Unplanned overnight admission	SAFETY	12.5%	62.5%	25.0%	Red	Red	Red	Red	Grey	Red	Green	Grey	17.5%
92. Bed occupancy rate (inpatient and day surgery)	COST/PRODUCTIVITY	37.5%	37.5%	25.0%	Red	Green	Grey	Red	Green	Red	Green	Grey	42.5%

Table 2: Comparison of Day Surgery indicators available at national level in participating nations vs. England

# Vergelijking met UK

- Beschikbaarheid van de UK indicatoren in andere deelnemende landen
- op nationaal niveau
- op niveau van het centrum

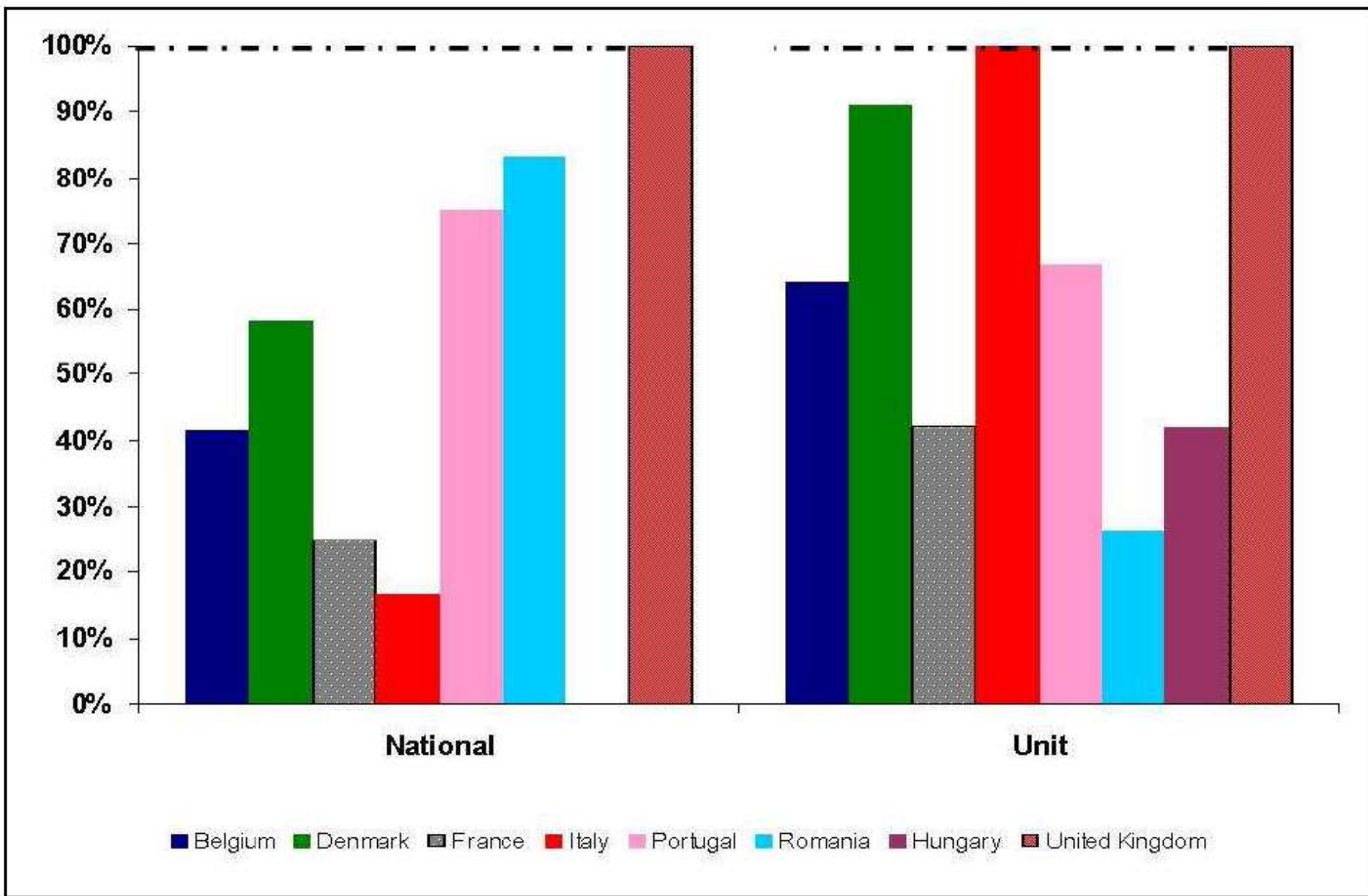


Figure 5: Comparison of Day Surgery indicators available at national and unit level in participating nations vs. England

# Beschikbaarheid indicatoren

- Beschikbaarheid van de bestudeerde indicatoren
- in de diverse deelnemende landen
- op de verschillende niveau's











# Face validity

- waarde van de indicatoren
- beoordeeld door de experts
- per deelnemend land

INDICATOR	TYPO INDICATOR	Belgium	Denmark	France	Italy	Portugal	Romania	England	Hungary	Mean
1. Number and % day surgery DS beds/total surgery beds	INPUTS	4.00	5.00	4.00	5.00	1.00	5.00	4.00	4.00	4.00
2. Full Time Equivalent Surgeons (including child surgeons) dedicated to DS	INPUTS		4.00	4.00	4.00	1.00	3.00	1.00	5.00	3.14
3. Providers dedicated to DS (total, public and private)	INPUTS		5.00	4.00	5.00	1.00		1.00	4.00	3.33
4. Number and % of DS units by public and private ownership, distinguishing between units financed by National Health Service/insurance and out of pocket disbursement	INPUTS	4.00	3.00	4.00	4.00	2.00		1.00	5.00	3.29
5. Number and % of available theatres and % time dedicated to DS	INPUTS	2.00	4.00	4.00	5.00	3.00	4.00	1.00	4.00	3.38
6. Ratio of staff to beds/benches/reclining chairs	INPUTS	2.00	5.00		4.00	4.00	4.00	1.00	5.00	3.57
7. Available computerized waiting list for DS patients	INPUTS		5.00	4.00	5.00	5.00	4.00	5.00	5.00	4.71
8. Available written protocols and procedures concerning patients:	INPUTS		5.00		5.00	4.00	5.00	5.00	5.00	4.83
9. Patients sex and average age	PATIENTS CHAR	5.00	5.00	4.00	4.00	3.00	5.00	1.00	5.00	4.00
10. Patients education level	PATIENTS CHAR		5.00	4.00	3.00	2.00	3.00	1.00	5.00	3.29
11. Average distance from patient's house to DS unit	ACCESS	4.00	5.00	4.00	4.00	2.00	4.00	1.00	3.00	3.38
12. Average waiting time for basket procedures in general and DS units	ACCESS	4.00	4.00	4.00	5.00	3.00	3.00	5.00	3.00	3.88
13. % of patients with standardized preoperative evaluation and tests	PROCESS	2.00	4.00	4.00	5.00	2.00	4.00	1.00	5.00	3.38
14. % of patients assessed before day of procedure	PROCESS	2.00	4.00		5.00	4.00	5.00	1.00	5.00	3.71
15. % of patients given specific date/time at decision to admit	PROCESS	2.00	4.00	3.00	5.00	4.00	5.00	1.00	5.00	3.63
16. % of patients given individual appointments	PROCESS	2.00		3.00	4.00	4.00	4.00	1.00	5.00	3.29
17. % of patients reminded just before appointment	PROCESS	4.00	3.00		3.00	4.00	3.00	1.00	4.00	3.14
18. % of patients who have received a pre-anaesthesia assessment before DS	PROCESS	4.00	4.00	5.00	5.00	4.00	3.00	1.00	5.00	3.88

19. % patients with delays > 30' from time appointed for surgical procedure up to actual beginning	PROCESS	2.00	4.00		2.00	3.00		1.00	5.00	2.83
20. Mean operating time	PROCESS	4.00	5.00	3.00	5.00	4.00	4.00	5.00	5.00	4.38
21. Mean recovery room time	PROCESS	4.00	4.00	2.00	4.00	4.00	4.00	1.00	3.00	3.25
22. % patients accompanied by escort for discharge home and stay the first 24 hours, i.e. an adult to accompany the patient home and to be with them for the first 24-hours following surgery, and access to a functioning telephone at home	PROCESS	4.00	4.00			5.00	3.00	1.00	5.00	3.67
23. % patients discharged against medical advice	PROCESS	2.00	4.00	4.00	3.00	5.00	3.00	1.00	3.00	3.13
24. % patients with post operative follow up appointment with	PROCESS	4.00	5.00	3.00	5.00	4.00	4.00	1.00	3.00	3.63
25. % patients discharged with written	PROCESS	4.00	4.00	4.00	5.00	5.00	4.00	1.00	5.00	4.00
26. % patients assessed by "Readiness for discharge protocol" that includes:	PROCESS			4.00	5.00			1.00		3.33
27. Follow-up phone call after surgery at 24 h assessing	PROCESS			4.00	5.00			1.00		3.33
28. Survey of patients satisfaction carried out in last two years	PROCESS	4.00	5.00	4.00	5.00	3.00	4.00	5.00	4.00	4.25
29. Percentage of patients receiving anaesthesia care as day-stay surgery patients who have received a pre-anaesthesia assessment before the day of day surgery	PROCESS	2.00		2.00	4.00		3.00	1.00	5.00	2.83
30. Percentage of surgical patients who received prophylactic antibiotics consistent with current guidelines	PROCESS	4.00	4.00	2.00	4.00	3.00	3.00	1.00	5.00	3.25
31. Percentage of Ambulatory Surgery Center admissions with an order for a prophylactic antibiotic for prevention of surgical site infection, who receive the prophylactic antibiotic on time	PROCESS	4.00	4.00	2.00	2.00	3.00	3.00	1.00	5.00	3.00
32. Percentage of Ambulatory Surgery Center admissions with surgical site hair removal with clippers or depilatory cream	PROCESS	4.00	5.00		2.00	3.00	3.00	1.00	5.00	3.29
33. cancellations of surgical procedures with notification by the patient at least 24 hours before	OUTPUT	4.00	5.00	4.00	4.00	5.00	3.00	1.00	4.00	3.75
34. % cancellations of surgical procedures without notification by the patient ("failed to arrive" or "did not attend")	OUTPUT	2.00	5.00	4.00	5.00	5.00	3.00	5.00	5.00	4.25

# Conclusie

- DSDP project
- IAAS project met Europese subsidie
- in kaart brengen van indicatoren voor one day chirurgie
- poging tot standardisatie
- zie [www.baas.be](http://www.baas.be) voor de hele studie