

# HOSPEDALE DE FUTURO : QUALI PROSPETTIVE ? L'HOPITAL DEMAIN : QUELLES PERSPECTIVES ?

**Il ruolo della IAAS nei programmi europei**

**Le rôle de**

**l'International Association for Ambulatory Surgery Surgery  
dans les programmes européens**

G. Parmentier

Honorary Member IAAS



Venezia, Italia - 3 décembre 2010  
Palazzo Franchetti - Scuola Grande S. Evangelista

### **Une société savante - A learning society**

Foundation date: 1995

Full Members: 17

Associate Members: 3

Corresponding Members: 2

1995-2009 Eight International Congresses

1993 First Edition of Ambulatory Surgery Journal

1999 First IAAS International Survey

## Une société savante - A learning society

- ☞ **Pluridisciplinarité - multidisciplinary**
- ☞ **Pluriprofessionnalité - multiprofessionality**
- ☞ **1 association par pays - 1 association by country**

L'objet de l'I.A.A.S. est de contribuer à créer de la façon la plus large et la plus efficiente possible les conditions favorables à la compréhension correcte du concept de la chirurgie ambulatoire et à la mise en œuvre de politiques cohérentes et efficaces pour sa pratique et son évaluation permanente.

- **Efficienc e dans l'emploi des ressources, qualité dans la prise en charge** : Un des plus grand défis auquel nos sociétés ont à faire face consiste à pouvoir offrir une prise en charge sanitaire d'un prix abordable, accessible à tous, et de qualité.

Maintenant, c'est plus que jamais essentiel, un usage responsable doit être fait des ressources disponibles.

Moderne, la chirurgie ambulatoire est un outil puissant pour gérer les ressources limitées d'aujourd'hui.

- **Un concept spécifique**

La chirurgie ambulatoire moderne n'est pas réductible à un séjour hospitalier raccourci ou à un modèle architectural. Bien plus, elle est un concept complexe et multidisciplinaire articulant les sphères institutionnelles, organisationnelles, médicales, de soins, économiques et qualitatives.

*Déclaration liminaire 1995*

# Une société savante - A learning society Légitimité - Legitimacy

- ❏ **Faible sur les pratiques médicales**
- ❏ **Forte sur les pratiques organisationnelles et les méthodes d'évaluation**

## **Méthodes - Methods**

- ☞ **Définitions**
- ☞ **Indicateurs de résultats - Clinical indicators**
- ☞ **Basket - Trolley (UK) - Gestes marqueurs (France) - Bads Directory (UK)**
- ☞ **Statistiques - Statistics - Benchmarking**
- ☞ **Aide à la réglementation - Help for regulation**
- ☞ **Formation - Education**

# Role of the IAAS

## **INTERNATIONAL ASSOCIATION FOR AMBULATORY SURGERY CLINICAL INDICATORS FOR AMBULATORY SURGERY**

2/11/2002 - PARIS

The following Clinical Indicators have been derived from the Australian and French Clinical Indicators.

### **INDICATOR 1. CANCELLATION OF BOOKED PROCEDURES.**

1.1 Failure to attend the day surgery centre/unit.

- Acute medical condition.
- Decision of the patient
- Organisational reasons.
- Other reason (explain...)

1.2 Cancellation of the booked procedure after arrival at the day surgery centre/unit.

- Pre-existing medical condition.
- Acute medical condition.
- Organisational reasons.
- Other reason (explain...)

### **INDICATOR 2. UNPLANNED RETURN TO THE OPERATING ROOM ON THE SAME DAY.**

### **INDICATOR 3. UNPLANNED OVERNIGHT ADMISSION.**

- Surgical reason(s)
- Anaesthetic/medical reason(s)
- Social / administrative reason(s)

### **INDICATOR 4. UNPLANNED RETURN OF THE PATIENT TO AN AMBULATORY SURGERY UNIT OR HOSPITAL.**

- < 24 hours
- > 24 hours and < 28 days

### **INDICATOR 5. UNPLANNED READMISSION OF THE PATIENT TO AN AMBULATORY SURGERY UNIT OR HOSPITAL.**

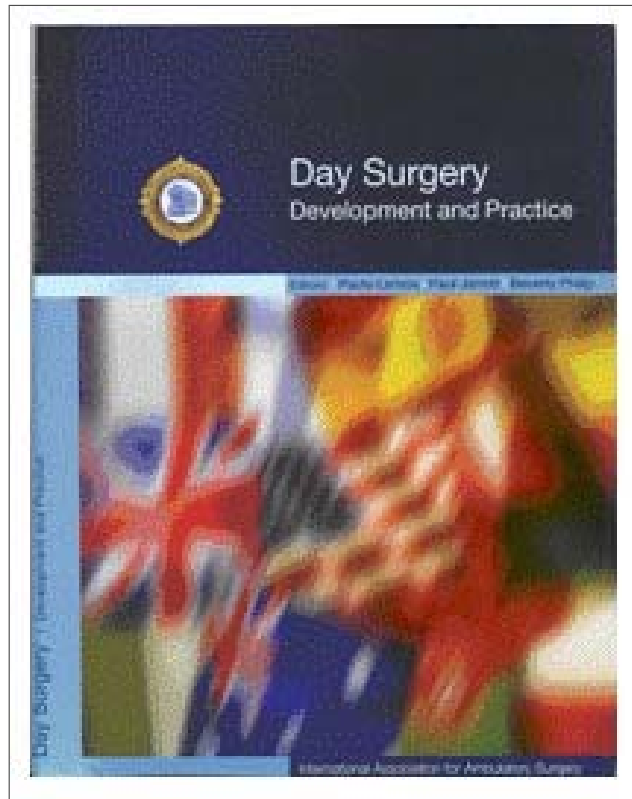
- < 24 hours
- > 24 hours and < 28 days

### **ADDITIONAL CLINICAL INDICATORS CONSIDERED INAPPROPRIATE.**

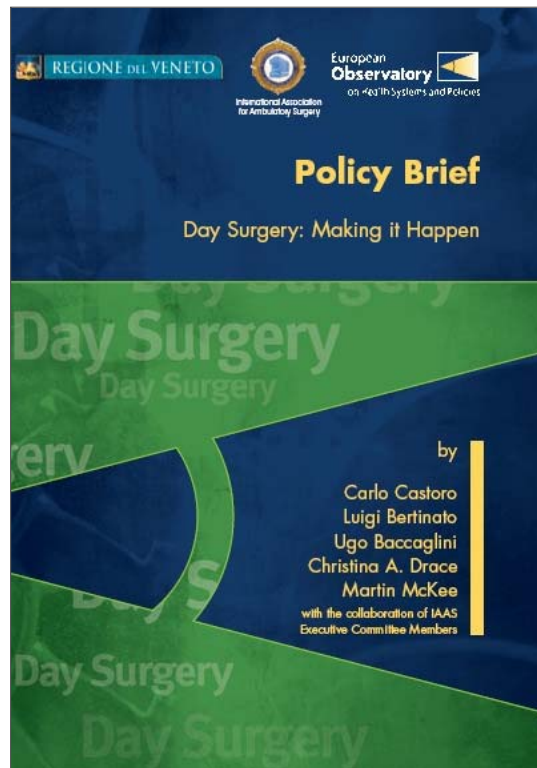
- Morbidity rate

# Role of the IAAS

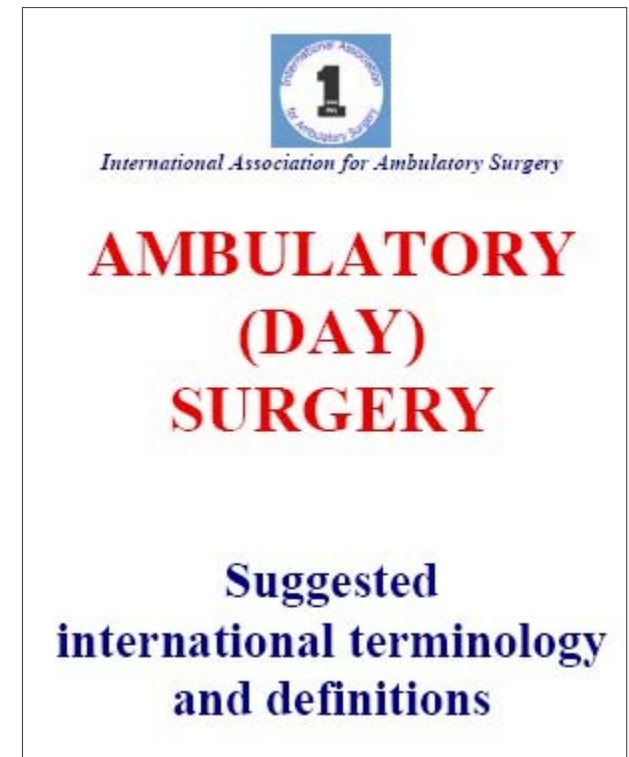
## Publications



Contributions from leading experts in the field of ambulatory surgery all over the world



How to achieve the full potential of day surgery...



It is important that definitions are the same in the member countries.

### **WEBSITE**

<http://www.iaas-med.com>

Day Surgery (DS) development represents a priority being an important opportunity for health systems reorganization.

Strong evidence suggests that DS is the best option for 80% of elective surgical operations providing a safe, high quality and cost-effective approach.

Visit the website for more details.



# Role of the IAAS

## 9th International Congress on Ambulatory Surgery

*State of the Art and Future Possibilities*



IAAS  
2011

**Copenhagen**  
**8-11 May 2011**



Copenhagen 8 - 11 May 2011 - Bella Center



**Click here**  
to enter site...

# Role of the IAAS

<http://www.dsdp.eu/>



DSDP IS CO-FUNDED BY THE EUROPEAN COMMISSION UNDER THE PROGRAMME OF COMMUNITY ACTION IN THE FIELD OF PUBLIC HEALTH 2008-2013

**Home**

**About DSDP**

**Highlights**

**DSDP Project**


**Meetings**



**What is the project about?**

Day Surgery (DS) development represents a priority being an important opportunity for health systems reorganization. Strong evidence suggests that DS is the best option for 80% of elective surgical operations providing a safe, high quality and cost-effective approach. There is great potential for further expansion of DS in Europe.

*...learn more*

**DSDP partners area** 

**Work Packages**

**Timeschedule**


**Deliverables**

**Final report WP4**

**Protocol DSDP\_WP5**

**Partners**

**Main partner:**

 **Agenzia Regionale Socio Sanitaria del Veneto ARSS**  
Project Manager: Costantino Gallo  
Project Leader: Ugo Baccaglioni

► **Associated Partners**

► **Collaborating Partners**


**News&Events**

**Final report WP4**

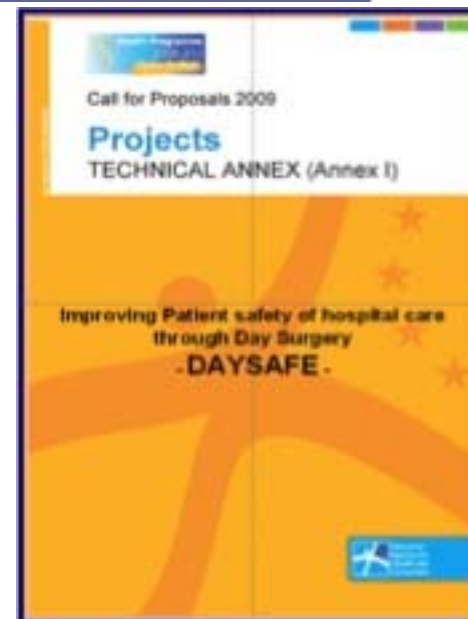
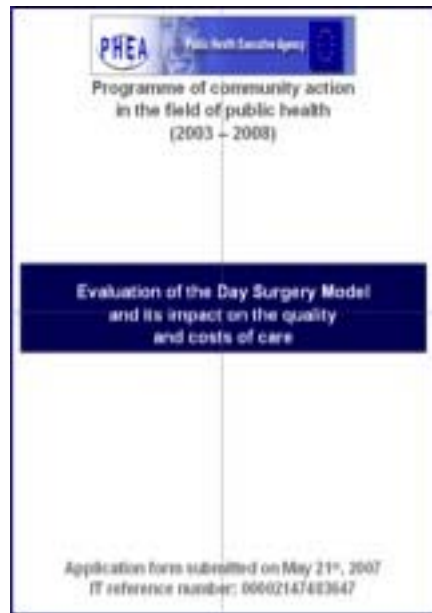
**DELIVERABLE N° 4**

**Report on the analysis of DS indicators available at International level – WP4**

Period covered:	from September 2009 to April 2010
Due date of deliverable:	April 2010
Submission date:	April 2010

 Feel free to contact us by sending email to:  
**daysurg@unipd.it**

# Role of the IAAS



# Role of the IAAS



Agenzia Nazionale per i Servizi Sanitari Regionali  
AGENAS

1. Belgium	National Institute Health and Disability insurance	
2. Belgium	Sint-Augustinus General Hospital	
4. Denmark	Association of Danish Regions	
6. France	Haute Autorité de Santé	
8. Hungary	Europ-Med	
10. Italy	Agenzia Regionale Socio Sanitaria del Veneto	
12. Italy	Azienda Ospedaliera di Padova	
14. Portugal	Administracao Regional de Saude Do Norte	
16. Portugal	Centro Hospitalar do Porto	
18. Romania	Clinical Emergency County Hospital	
20. Spain	Catalan Agency for Health Technology assessment	
22. Sweden	Universitets Sjukhuset i Orebro	
13. Norway	Martina Hansens Hospital	

**Fédérer  
les énergies,  
les savoir-faire  
et les institutions  
autour  
d'objectifs communs  
concernant la chirurgie  
pour le bien  
des patients  
et de la société**