

SRSS PROJECT

Questionnaire Number 2 For National Level Barriers To Ambulatory Surgery

1. **Please choose one answer that fits with the internationally accepted definition of ambulatory surgery**
 - a) 24 hour (overnight stay)
 - b) 12 hour's hospital stay
 - c) Ambulatory surgery is defined as an operation/procedure, where the patient is admitted and discharged on the same working day
 - d) outpatient operation
2. **Do you consider the organisation of ambulatory surgery in acute hospitals can help in the process of healthcare reform and reconstructional institutional changes to replace inpatient care with more cost-effective outpatient/day care services?**
 - a) yes
 - b) no
3. **According to our regulations, who has the right to perform ambulatory surgery? (Please choose only one answer)**
 - a) any physician
 - b) any specialist
 - c) Any specialist surgeon, who has at least an experience of 5 continuous years in his field after his specialisation, and can prove his proficiency by quantifying the number of surgeries he has performed in his field
4. **In your opinion, which is the best way and where to organize ambulatory surgery? (Please choose only one answer)**
 - a) in mixed wards and theatres, which can be used for emergency surgery purposes
 - b) in ambulatory surgery dedicated wards, but the theatres are common
 - c) in wards and theatres dedicated for ambulatory surgery
 - d) To organize and build units dedicated to ambulatory surgery facilities within the campus of the hospital, which are functionally separated from the inpatient sections of the hospital. They have their own operating theatres, 'ward area', entrance, reception, staff, management etc.
- a) **5. Do you consider it necessary to introduce levels of care / progressivity when giving regulations for ambulatory surgery activity?**
 - b) yes
 - c) no
5. **What types and levels of ambulatory surgery units are existing in Hungary? (Please choose only one answer)**
 - a) Ambulatory surgical units in outpatient/polyclinic centres, these are free-standing units
 - b) hospital day surgery units
 - c) ambulatory surgery centres, where major day surgery procedures are performed with the possibility of overnight stay

- d) all „a”, „b” and „c”
- a) **Please give us your opinion, what factors determine the levels of care in the various types of units in question enrolled in 5?**
- b) only the disease and the planned procedure
- c) the disease and the planned operations/procedures, the availability of preoperative optimisation and anesthesia department, the theatre and needed for special equipment, the presence of a suitable infrastructure and a postoperative room or ICU
- 6. Have you the possibility to treat any any surgical complication at your unit or do you need to transfer itt to another hospital??**
- a) Yes, we have
- b) No, we have not
- 7. What are the ambulatory surgery clinical indicators related to?**
- a) to the whole process
- b) to the procedure and its complications
- 8. Does your hospital has a possibility of med-hotel or similar services for patients arriving from remote areas who need accomodation after ambulatory surgery?**
- a) yes
- b) no
- 9. Do you have an IT system devoted to serve your ambulatory surgery services?**
- a) yes
- b) no
- 10. Is the building in the hospital campus nominated for your ambulatory surgery activities suitable to serve the patient pathway (separate entrance, reception room, changing room, preop. room with bathrooms, theatres, postop. anesthesia, parking area etc.)**
- a) yes
- b) no
- 11. If you do not have a nominated infrastructure for the ambulatory surgery activity, how can you finance the investment to establish a new building?**
- a) Own hospital resources (possibly including external capital investment)
- b) with central government or tender grants
- 12. How are you planning to provide the human resources for your new activity?**
- a) retraining of own staff
- b) employing a new work force
- a) 13. How do you imagine running an ambulatory surgery unit? (only one answer is requested)**
- b) based on international standards**

- c) **based on international standards and adapted Hungarian regulations**

13. Do you consider it necessary to accredit the ambulatory surgery units in hospitals?

- a) Yes
- b) No

14. Do you think there is a need to revise the ambulatory surgery procedure list?

- a) yes
- b) No

15. If yes, then what do you think, what are the potential elements for the revision of the list of procedures?

- a) an overview of the interventions on the current list and, where appropriate, the elimination of obsolete or no longer in use procedures.
 - b) an overview of the interventions on the current list and, where appropriate, the elimination of obsolete or no longer in use procedures and the inclusion of new, up-to-date surgical interventions, cost assessment and financing of priority procedures
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16. In hospital practice, the Cap Volume Limit for financing ambulatory surgery was abolished for hospitals and 10% plus financing premium came into effect. Do you think more incentives should be introduced into the system that would further increase the spread of ambulatory surgery?

- a) no
- b) yes

17. In case that you would like to introduce major ambulatory surgery, can your hospital buy the new technology and devices?

- a) yes
- b) no

18. Do you think that the DRG value and related value of weights need to be revised from time to time to follow market movements and prices?

- a) yes
- b) no

20. What should be the basis for a financial revision? (please tick one answer only)

- a) to the same extent as inflation
- b) to the same extent as wage increases in human resources
- c) to the same extent as increase in prices (equipment, professional materials and other costs)
- d) "a", "b", "c" all together

21. Do you consider it necessary to introduce more incentives for the further spread of ambulatory surgery?

- a) yes
- b) no

22. If you support the introduction of incentives, what do you think?

- a) support for education
- b) giving financing premium
- c) support and provision of new technologies
- d) "a", "b", "c" all together

23. Do you believe there are factors preventing the adoption of ambulatory Surgery in your hospital

- a) Yes
- b) No

24. If Yes to above do these factors include (tick all that apply)

- a. Clinical staff – surgeons resistance
- b. Clinical staff – anaesthetist resistance
- c. Clinical staff – nursing resistance
- d. Management of hospital resistance
- e. Lack of expertise in ambulatory surgery
- f. Lack of facilities for ambulatory surgery