

Ambulatory surgical centers may exceed performance of hospitals for certain procedures

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Measuring five quality-base performance areas, an ambulatory surgical center out performed a standard hospital based surgical center in otolaryngic surgeries, according to new research in the December 2009 issue of *Otolaryngology - Head and Neck Surgery*.

The cross-sectional study analyzed a total 486 cases at a pediatric ambulatory surgical center (ASC) and a hospital-based facility (HBF). The cases comprised of the four most common pediatric surgical procedures at the ASC compared to the HBF: ventilation tube insertion, dental rehabilitation, adenotonsillectomy, and ventilation tube insertion/adenoidectomy. Only outpatient procedures were included.

The authors designed a series of quality performance measures based on the Institute of Medicine's multidimensional definition of quality. The study aimed to develop a better understanding of how an ASC might be a viable high-quality, low-cost organizational structure. The quality measures included: safety, patient-centeredness, timeliness, efficiency, and equitability.

Seventy-seven percent of ASC cases finished within the scheduled time compared to 38 percent at the HBF, a difference of about 30 percent. Total charges were 12 - 23 percent less at the ASC as well. However, patient satisfaction was similar between facilities (ASC, n=64; HBF, n=35). For the studied sample size, the ASC had no unexpected safety

events, compared to nine events at the HBF.

The authors point out that as the healthcare industry responds to public demand for higher quality with scarce resources, innovative delivery models that provide high-quality, low-cost care are increasingly needed. ASCs have been described as such a model by taking advantage of economies of scale and low-cost organizational structures. The authors further note that although previous studies have shown the benefits of ASCs in one quality measure or another, this study is the first to explore multiple dimensions of quality in one surgical area to give a more complete picture.

The authors write "Intense competition, increasing quality standards and scarce resources have led many institutions to shift toward 'service-line' strategies, allowing facilities to concentrate on what they do best. It makes sense, at least, for institutions to determine what types of organizational structure provide the best patient care." The results of this study suggest that government programs supporting ASCs may be a wise use of resources and that investment in ASCs is a way academic health centers can remain financially competitive.

Source: American Academy of Otolaryngology -- Head and Neck Surgery

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