

INTERNATIONAL BENCHMARKING OF THE DANISH HOSPITAL SECTOR – A SUMMARY

February 2010

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This international benchmarking study compares the Danish hospital sector with that of other countries in the following four fields:

- Health systems and health status
- Expenditure, personnel, capacity and activity
- The patient and the hospital service
- Use of resources and quality of care

The benchmarking indicators relate primarily to resources, process, services and effects, cf. Figure 1.1.

For the comparison, seven European countries have been selected: Sweden, Norway, Finland, the UK, Germany, the Netherlands and France. In addition, an OECD average is presented where possible.

The countries have been selected primarily on the basis of the fact that they are countries with which Denmark naturally compares itself due to geographical closeness and comparable living standards. Similarly, consideration has been given

to the fact that the countries' hospital sectors are to some extent comparable and generally considered to hold high international standards.

Knowledge of how the Danish hospital sector performs compared with other countries may give an indication of where there might be something to learn from other countries. Consequently, the international benchmarking study contributes to making the performance of the hospital sector visible for the benefit of the patients. This means that the benchmarking process rests on the same idea that lies behind the view that the management of the Danish regions and hospitals should in future be based to a greater extent on performance targets that can support an efficient use of resources, cf. *Sundhedspakke 2009* (Health Package 2009). Two out of the three fields which the Danish Government has proposed as future goals for efficient patient pathways are also included as indicators in this international benchmarking. They are the use of out-patient treatment and the average length of stay in hospitals.

Figure 1.1. Model for the benchmarking of the Danish hospital sector



Results of the benchmarking study

Generally, the benchmarking study shows that the Danish hospital sector performs well in most areas compared with the seven countries in the publication and with the average of the OECD countries. With respect to Denmark, it should be underlined that access to health care is good with relatively short waiting times, and that Denmark has the lowest proportion of citizens who experience unmet needs for medical examination among the countries benchmarked, cf. Box 1.1.

In the area of heart disease treatment the quality is high, whereas Denmark performs less well in the area of cancer treatment. This should, however, be seen in connection with the fact that data for cancer are from 2007 when the integrated cancer patient pathways had not yet been implemented, and the extraordinary investments in scanners had not yet been made.

Box 1.1. Overall results

- Danes have shorter life expectancy than citizens in the other seven countries in the comparison and the average of the OECD countries. This is due among other things to lifestyle factors (for example high consumption of tobacco and alcohol). Life expectancy in Denmark was 78.4 years in 2007 compared with 79.1 years in the OECD countries on average.
- In Denmark, hospital expenditure accounts for 4.3 per cent of GDP, whereas the average for the OECD countries is 3.1 per cent. Hospital expenditure in the seven other countries in the comparison accounts for between 2.8 and 4.1 per cent of GDP.
- After Norway, Denmark has the highest number of full-time employees at public hospitals per 1,000 population.
- Denmark performs relatively more surgical procedures on in-patients than the other countries in the comparison and the average of the OECD countries. In Denmark, the hospital sector performs 76 surgical procedures on in-patients per 1,000 population. By comparison, the average in the OECD countries is 71 per 1,000 population.
- Danish patients stay in hospital for a shorter time than patients in the other countries. In Denmark, the average length of stay for acute care in-patients is 3.5 days, whereas the average for the OECD countries is 6.6 days.
- In 2007, Denmark had the lowest mortality rate after admission to hospital with acute myocardial infarction and ischemic stroke among the countries in the comparison. The mortality rate among Danish patients was 2.9 per cent one month after admission to hospital compared with 4.9 per cent for the OECD countries on average.
- In 2007, Danish patients had a higher mortality rate after hemorrhagic stroke than patients in the three other Nordic countries in the comparison and Germany. However, the mortality rate in Denmark was at the same time lower than the OECD average.

- In 2002-2007, Denmark ranked below the OECD average with respect to the five-year survival rate for colorectal cancer and cervical cancer, but ranked just above the OECD average with respect to the five-year survival rate for breast cancer.
- Danish patients have well-developed rights in relation to the other countries in the comparison. Out of the eight countries in the comparison, it is only Denmark that has a generally extended free choice of hospital after one month's waiting time. Similarly, among the eight countries, Denmark has the lowest level of unmet needs for medical examination.

In the following, a summary of the main results of the benchmarking study is presented.

Health systems and health status

Even though the countries in the benchmarking study have been selected with comparability in mind, there are differences. The differences exist both in the countries' organisation of the health care sector and in the populations' health status. It is important to describe these structural conditions as they constitute the framework for the hospital sector activities and are connected to several of the selected indicators and the countries' position in the individual areas. The countries' different division of health care tasks between the hospital sector, practising general practitioners and practising specialists and the local government health sector respectively may, among other things, influence the countries' volume of hospital expenditure and hospital staff figures.

Two models for health systems

The eight countries have organised their health systems differently. Overall, however, they may be categorized into two main models.

The Nordic and British model is characterised by tax-based financing and large-scale public production of hospital services. The other model, which comprises Germany, the Netherlands and France, is characterised by insurance-based

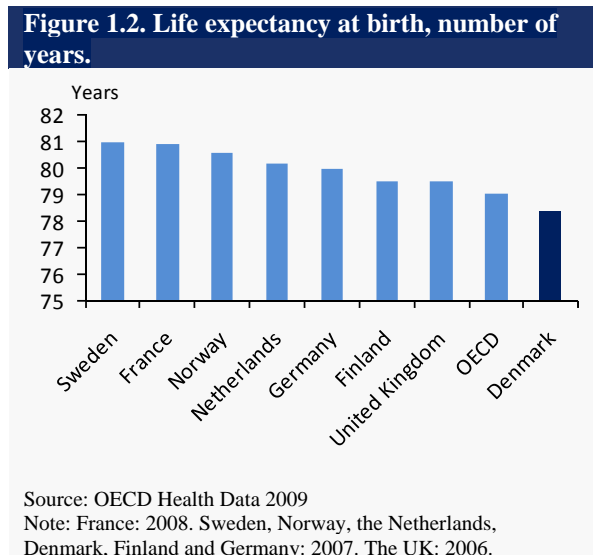
financing and a combination of public and private health services production.

Denmark has the highest proportion of public financing of health services among the countries and is placed in the middle with regard to the proportion of the population with supplementary private health insurance.

The population's health status

The population's general health status is of great importance with respect to the consumption of health services, including hospital services. Various targets for the population's health status such as life expectancy and mortality are also influenced to a high degree by the citizens' lifestyle, etc. Therefore, these targets cannot be seen as a reflection of how well the hospital sector works in the individual countries.

The Danish population lives shorter lives on average than the populations in the selected countries, cf. Figure 1.2.



Lifestyle, among other things, is of great importance in terms of what diseases citizens contract and, consequently, in terms of life expectancy. For example, most of the difference in life expectancy between Denmark and Sweden can be explained as a result of the populations' smoking habits and alcohol consumption.

Box 1.2. How to explain differences in life expectancy?

Life expectancy in Sweden is now almost three years longer than in Denmark. A very substantial part of the Danish excess mortality and low life expectancy compared to Sweden can be attributed to high mortality related to alcohol and tobacco consumption. Overall, alcohol and smoking account for almost the entire difference between Danish and Swedish men and for 75 per cent of the difference between Danish and Swedish women.

Source: Knud Juel: "Life expectancy and mortality in Denmark compared to Sweden" in *Ugeskrift for læger*, 2008;170(33):2423

The Benchmarking study shows that there is a high proportion of smokers in Denmark, and that alcohol consumption is correspondingly higher than in most of the other countries benchmarked. With regard to the proportion of the population suffering from obesity, Denmark belongs to the middle group of the selected countries and falls somewhat below the OECD average.

Expenditure, personnel, capacity and activity

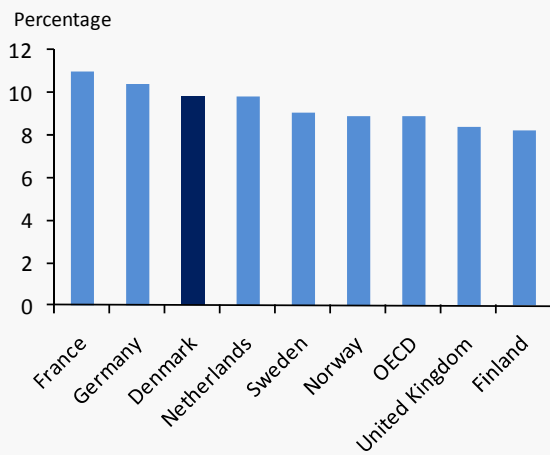
Denmark is generally ranked high when the benchmarked countries are compared on expenditure, personnel, capacity and activity.

Expenditure

Denmark is placed in the middle of the countries included in the comparison with regard to the proportion of GDP accounted for by total health expenditure¹. Denmark's health expenditure totals 9.8 per cent of GDP in 2007, which means that Denmark ranks above the 8.9 per cent of GDP which is the average for the OECD countries, cf. Figure 1.3.

¹ The OECD definition of health expenditure includes expenditure on some healthcare areas which in Denmark is borne by the social sector.

Figure 1.3. Total expenditure on health as percentage of gross domestic product, percentage, 2007.

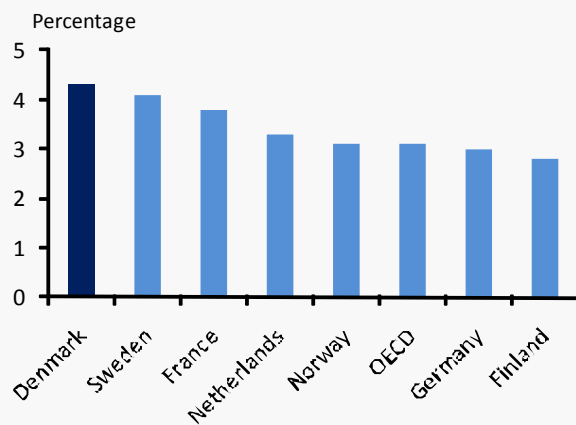


Source: OECD Health Data 2009.

Note: Data include expenditure paid by public authorities, private insurance schemes and private out-of-pocket payments, including expenditure on investments in the health area.

Hospital expenditure in Denmark accounts for 4.3 per cent of GDP, whereas the average for the OECD countries is 3.1 per cent, cf. Figure 1.4.

Figure 1.4. Expenditures on hospitals' services as percentage of gross domestic product, percentage, 2007.



Source: OECD Health Data 2009

Note: Data refer to expenditure on public and private hospitals. Investments are not included. Data for Norway are from 2006.

However, it is not a goal in itself to use many resources. The overarching goal should be that the resources are used efficiently so as to generate maximum outcome.

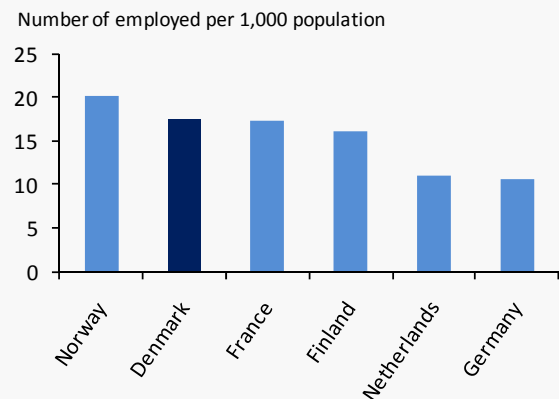
With respect to investments in equipment and construction/building in the health area, Denmark's position is in the middle.

Personnel

Remuneration costs account for a very large proportion of total hospital expenditure. The reason is that the health sector, including the hospital sector, is a sector with very direct patient contact and it is, therefore, a labour intensive area.

In Denmark, there are approx. 17.5 full-time employees at public hospitals per 1,000 population, cf. Figure 1.5. Among the selected countries, only Norway has more full-time employees per 1,000 population. The indicator includes all hospital employees – i.e. not only health professional personnel.

Figure 1.5. Full-time employed persons in hospitals. Number per 1,000 population, 2007.



Source: OECD Health Data 2009 and the Danish National Board of Health/the National Wage Statistics Office of Danish local Authorities (Danish data).

Note: There may be differences in the various countries' calculations of full-time employees. Data refer to the number of full-time employed persons employed in general and speciality hospitals. Data cannot be broken down by personnel groups. Data for Denmark refer exclusively to public hospitals. Finland, the Netherlands: 2006. There are not sufficient data to draw up an OECD average.

Denmark educates more doctors than the other countries and ranks in the middle with respect to newly graduated nurses/social and healthcare assistants. Every year, Denmark educates 16 doctors per 1,000 population, whereas the OECD

average is ten medical graduates per 1,000 population.

Capacity

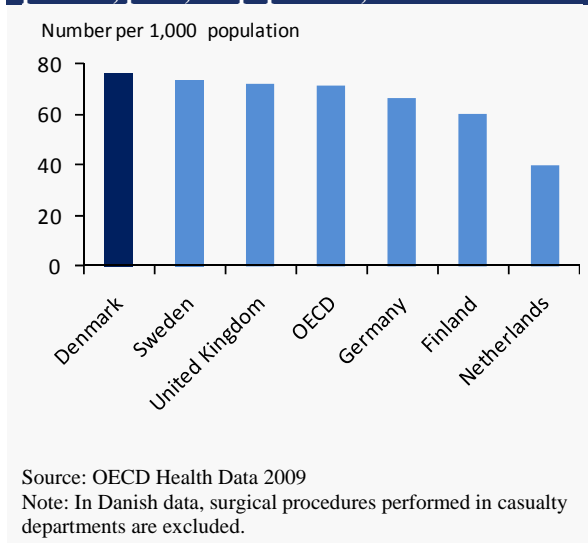
Denmark belongs to the middle of the field of the countries with respect to both acute care beds and psychiatric beds. Knowledge of the number of hospital beds is subject to a limitation in the sense that it only gives an idea of the capacity to treat in-patients. In line with the ongoing change from in-patient to out-patient treatment, the number of beds has become an increasingly incomplete reflection of hospital sector capacity.

With respect to scanners, Denmark has generally more CT, MR and PET scanners per million population than the other countries in the comparison.

Activity

For in-patients, Denmark ranks high with regard to the number of surgical procedures and the use of bed capacity. In Denmark, the hospital sector performs 76 surgical procedures on in-patients per 1,000 population. By comparison, the OECD average is 71 surgical procedures per 1,000 population, cf. Figure 1.6.

Figure 1.6. Number of surgical procedures, in-patients, per 1,000 population, 2007.



The Danish health service performs approx. 75 surgical procedures on out-patients per 1,000 population. The other four countries have between 21 and 86 surgical procedures per 1,000 population.

Denmark is in the middle of the countries benchmarked regarding the number of discharges. In Denmark, the hospital sector discharged approx. 170 patients per 1,000 population in 2007, whereas the OECD average was 158 patients per 1,000 population.

Use of resources and quality of care

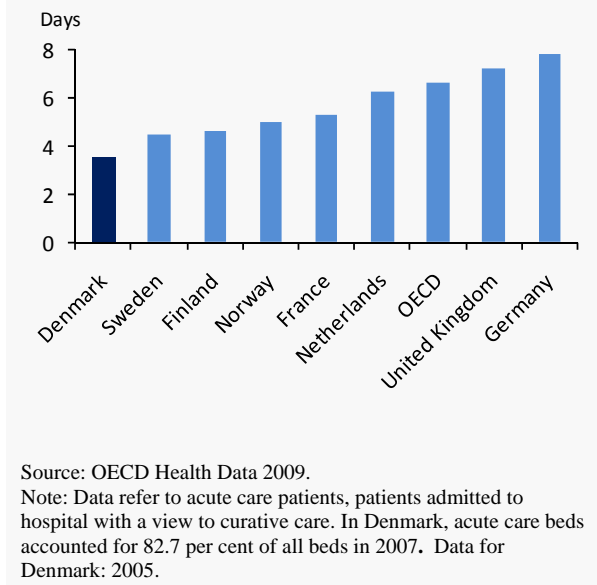
Comparing the selected countries on indicators for use of resources, Denmark ranks high. With regard to quality of treatment, the picture varies depending on the individual disease areas.

Use of resources

The Danish hospital sector produces a few more surgical procedures per full-time hospital employee than the other four countries where data exist. In Denmark, the hospital sector performs 8.6 surgical procedures annually per full-time employee. In terms of the number of discharges per full-time hospital employee, Denmark is in the middle group of the countries included in the benchmarking study.

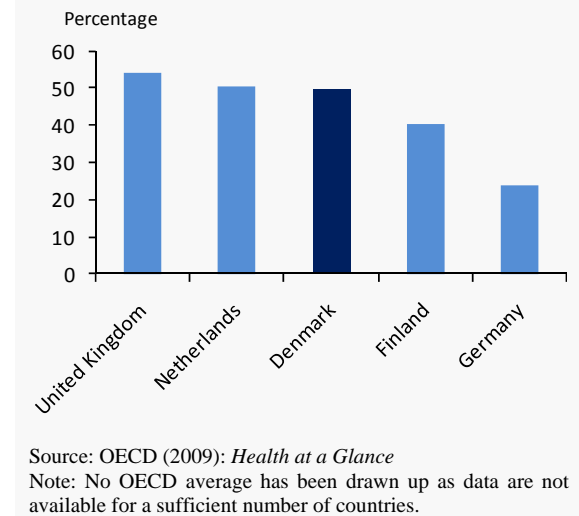
Danish patients stay in hospital for a shorter time than in the other countries. In Denmark, the average length of stay for acute care is 3.5 days, whereas the OECD average is 6.6 days, cf. Figure 1.7.

Figure 1.7. Average length of stay, acute care, number of days, 2007.



In Denmark, about half the surgical procedures are performed on out-patients, cf. Figure 1.7. This should be seen in connection with the good experience of accelerated patient treatment processes where the patient treatment processes are organised so that the need for admission to hospital is reduced. As is the case in Denmark, several other countries are restructuring in the direction of increased out-patient treatment, both for the sake of the patient and to achieve more efficient use of resources. The other countries' proportion of out-patient treatment covers a range of between approx. 24 and 54 per cent.

Figure 1.8. Number of surgical procedures, day cases as percentage of total performed surgical procedures, percentage, 2007.

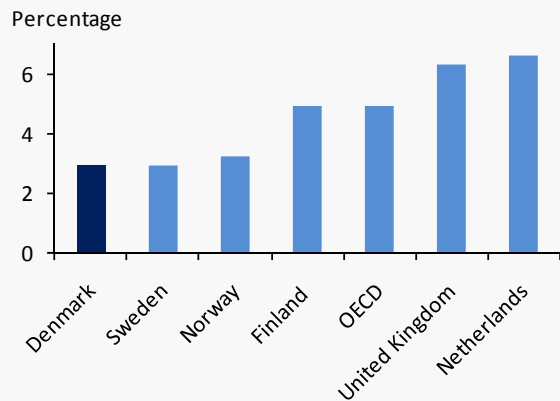


Quality of care

Quality of care is compared in the two disease areas where most deaths occur in the industrialised countries, i.e. cardiovascular and cancer diseases.

Denmark has the lowest 30-day mortality rate after admission to hospital both with acute myocardial infarction and ischemic stroke. In Denmark, a total of 2.9 per cent of patients die within the first 30 days after admission to hospital with acute myocardial infarction, whereas the OECD average is 4.9 per cent, cf. Figure 1.9.

Figure 1.9. In-hospital case-fatality rates within 30 days after admission for acute myocardial infarction (AMI), rates per 100 patients, 2007.

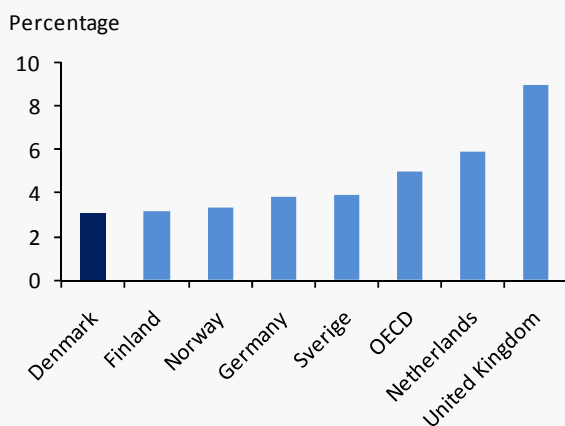


Source: OECD (2009): *Health at a Glance*

Note: Age-sex standardised rates per population. The rates are in-hospital case-fatality rates i.e. the rates include only deaths at the hospital where admission took place. Data for the Netherlands are from 2005.

With respect to ischemic stroke, a total of 3 per cent of patients die within the first 30 days after admission to hospital with ischemic stroke in Denmark. The OECD average is 5 per cent, cf. Figure 1.10.

Figure 1.10. In-hospital case-fatality rates within 30 days after admission for ischemic stroke, rates per 100 patients, 2007.



Source: OECD (2009): *Health at a Glance*

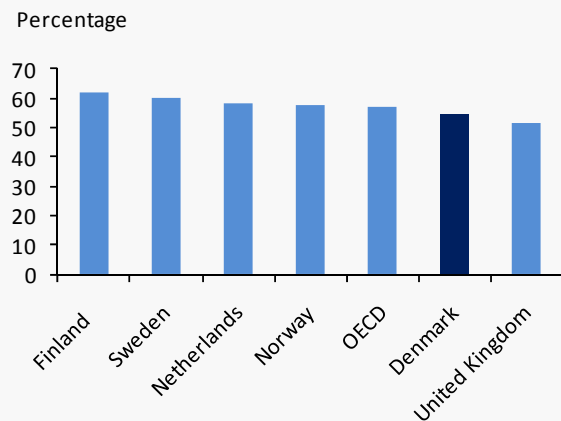
Note: Age-sex standardised rates. The rates are in-hospital case-fatality rates i.e. the rates include only deaths at the hospital where admission took place. Data for the Netherlands are from 2005.

With regard to the 30-day mortality rate after hospital admission with hemorrhagic stroke, Denmark is in the middle group of countries in the

benchmarking study with a mortality rate after 30 days of just under 17 per cent, whereas the OECD average is approx. 20 per cent.

In the area of cancer, the relative five-year survival rate for colorectal cancer as well as cervical cancer is low in Denmark. For example, a total of 54 per cent of patients suffering from colorectal cancer were still alive in 2007, five years after the disease had been diagnosed, cf. Figure 1.11. The OECD average was 57 per cent.

Figure 1.11. Five-year survival rate for colorectal cancer, percentage, 2002-2007.

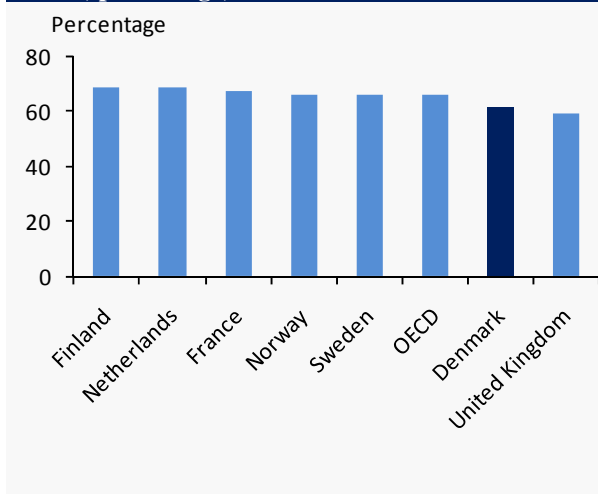


Source: OECD (2009): *Health at a Glance*

Note: Age standardised rates. Finland (2002-05). Sweden (2003-08). Norway (2001-06). The UK (2001-06). The Netherlands (2001-06). There are no data for 2002-2007 for France. There are no national data for Germany.

With regard to cervical cancer, a total of 61 per cent of Danish patients were still alive in 2007, five years after the disease had been diagnosed, cf. Figure 1.12. The OECD average was just below 66 per cent.

Figure 1.12. Five-year survival rate for cervical cancer, percentage, 2002-2007.



Source: OECD (2009): *Health at a Glance*
 Note: Age standardised rates. Data for France are from 1997-2002. There are no national data for Germany.

For breast cancer, the five-year survival rate in Denmark belongs to the middle group of countries benchmarked, and it is just above the OECD average. In Denmark, a total of 82 per cent of patients suffering from breast cancer were still alive in 2007. The OECD average was approx. 81 per cent.

Data for cancer relate to patients who were diagnosed in 2002, and the relative survival rate is calculated for 2007. If this is compared with the 5-year survival rate for patients diagnosed in 1997, there has been a positive development with respect to colorectal cancer and breast cancer. All data for cancer survival refer to the time before the introduction of integrated cancer patient pathways in Denmark. Therefore, the effects of the patient pathways have not yet become visible in the comparison.

Waiting time and patient experience of quality

The comparison² shows that waiting time in the Danish hospital sector is low compared with the other countries. With respect to the three selected surgical procedures: breast cancer, bypass and hip

² The waiting time information derives from the questionnaire that has been completed by the health ministries of the benchmarked countries as there are no recent international data.

replacement operations, waiting times in Denmark are among the lowest. The waiting time for breast cancer and bypass operations is shorter than one month in Denmark.

In Denmark, patient experience of quality is high compared with the other countries, especially with regard to out-patients.

The patient and the hospital service

The benchmarking study shows that Danish patients have well-developed rights in relation to the other countries in the comparison.

Patients' access to health services

In Denmark, merely 0.2 per cent of citizens experience unmet needs for medical examination. This is the lowest proportion among the countries benchmarked. Furthermore, the comparison shows that all the countries, with the exception of Denmark and the UK, have out-of-pocket payment schemes for hospital treatment. Out-of-pocket payment is charged in the order of DKK 100-500 for a hospital visit.

Patients' rights

Patients in Denmark have a free choice of hospital (i.e. of public hospitals) without being charged any out-of-pocket payment. In four of the other countries there is also a free choice, in two of the countries a free choice of hospital may imply out-of-pocket payment for the patient, and in one country there is no free choice of hospital.

In Denmark, patients have an extended free choice of hospital when the waiting time in the person's region of residence exceeds one month. This is the shortest limit among the countries benchmarked. The non-Nordic countries that have been benchmarked have no similar schemes.

Information to patients

Danish patients have online access to information about hospital quality and waiting time on the websites www.sundhedskvalitet.dk and www.ventefinfo.dk. The information is addressed

to citizens and helps them to exercise their right to free choice of hospital. In Denmark, quality information can be used to compare hospitals on a number of parameters. The same applies to three of the other countries, whereas four of the countries benchmarked publish either limited or no quality data targeted at the citizens. It means that Denmark ranks high among the countries included in the benchmarking study.

Denmark is placed in the middle group with regard to patient rights assistance before/during treatment, as patients can obtain guidance from patient offices at regional level.

**All indicators in "International Benchmarking of the Danish Hospital Sector"
(www.sum.dk)**

Health System
1. Public expenditure on health care as percentage of total expenditures on health
2. Percentage of the total population with additional private insurance besides the fundamental/basic health care coverage
Health Status
3. Life expectancy at birth and absolute change in life expectancy at birth from 2001 to latest year
4. Daily smokers, percentage of population
5. Alcohol consumption in liters per capita (age 15+)
6. Overweight or obese population (BMI \geq 30), percentage of population.
7. Mortality rates for ischemic heart disease, number of deaths per 100,000 population
8. Danish data for mortality rates for ischemic heart disease, number of deaths per 100,000 population
9. Mortality rates for acute myocardial infarction, number of deaths per 100,000 population
10. Danish data for mortality rates for acute myocardial infarction, number of deaths per 100,000 population
11. Mortality rates for malignant neoplasms, number of deaths per 100,000 population
12. Danish data for mortality rates for malignant neoplasms, number of deaths per 100,000 population
Expenditure
13. Total expenditure on health as percentage of GDP
14. Total expenditure on health as percentage of GDP
15. Total expenditure on health per capita, DKK, PPP
16. Remuneration of specialists, DKK exchange rate
17. Remuneration of hospital nurses, DKK exchange rate
18. Expenditure on hospitals' services, DKK, PPP
19. Expenditure on hospitals' services as percentage of GDP
20. Expenditure on hospitals' services as percentage of total expenditures on health
21. Total investment on medical facilities per capita, DKK, PPP
Personnel
22. Number of full-time employed (FTE) persons employed in hospitals per 1,000 population
23. Registered physicians, number per 1,000 population
24. Practicing specialist employed in the health care sector (excluding general practitioners), number per 1,000 population
25. Practicing general practitioners employed in the health care sector, number per 1,000 population
26. Practicing professional nurses employed in the health care sector, number per 1,000 population
27. Medical graduates, numbers per 100,000 population
28. Doctors graduated in Denmark and emigration as percentage of all graduated
29. Doctors graduated in Denmark with Nordic citizenship (not Danish) and emigration as percentage of these
30. Nursing graduates, numbers per 100,000 population

31. Foreign-trained physicians as percentage of registered physicians
Capacity
32. Number of acute-care beds in hospitals, per 1,000 population
33. Number of psychiatric care beds in hospitals, per 1,000 population
34. Number of Computed Tomography scanners, per one million population
35. Number of Magnetic Resonance Imaging units, per one million population
36. Number of Positron Emission Tomography scanners, per one million population
Activity
37. Total surgical in-patients, per 1,000 population
38. Number of discharges, in-patients, per 1,000 population
39. Acute care occupancy rate, percentage
40. Number of total surgical day-cases, per 1,000 population
Use of resources
41. Yearly increase in productivity at Danish Hospitals, percentage
42. Number of surgical procedures per full-time employed in hospitals
43. Number of discharges per full-time employed in hospitals
44. Average length of stay by in-patients and acute care, days
45. Surgical day cases in percentage of total surgical procedures, percentage
Quality of care
46. In-hospital case-fatality rates within 30 days after admission for acute myocardial infarction (AMI), percentage
47. In-hospital case-fatality rates within 30 days after admission for ischemic stroke, percentage
48. In-hospital case-fatality rates within 30 days after admission for hemorrhagic stroke, percentage
49. Colorectal cancer, five-year relative survival rate, 2002-2007, percentage
50. Breast cancer five-year relative survival rate, 2002-2007, percentage
51. Cervical cancer five-year relative survival rate, 2002-2007, percentage
52. Average waiting time for elective treatment of coronary by-pass, months
53. Average waiting time for elective treatment of breast cancer, months
54. Average waiting time for elective treatment of hip replacement, months
55. Proportion of out-patients who are "satisfied" with hospital care, percentage
56. Proportion of in-patients who are "satisfied" with hospital care, percentage
The patient and the hospital service
57. Proportion of population with unmet needs for medical examination, percentage
58. Out-of-pocket-payment on hospital care
59. Is national healthcare legislation explicitly expressed in terms of patients' right?
60. Patients' right from their fundamental/basic health care coverage to choose which hospital to use within the country
61. Do patients' have entitlements, if waiting time exceeds the defined maximum waiting time?
62. Patients are entitled to have a specific contact person during hospital treatment lasting more than one day
63. Patients can get economic indemnity for medical mistakes and malpractice without the assistance of the judicial system, e.g. at a public patient insurance system
64. Access on internet to hospital quality ranking issued nationally aimed at non health professionals
65. Access on internet to comparable hospital and treatment specific national issued information on waiting times
66. Assistance from the public health authorities/the health insurer before or during their hospital treatment on deriving their various patients' rights

1. Public expenditure on health care as percentage of total expenditures on health								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
2001	82.7	81.8	83.6	71.8	80.0	79.3	62.8	79.4
Latest year	84.5	81.7	84.1	74.6	81.7	76.9	74.8	79.0
Change, absolute, per cent	1.8	-0.1	0.6	2.8	1.7	-2.4	12.0	-0.4

Source: OECD Health Data 2009 and Health at a Glance 2009 (for Netherlands).
Note: Data for latest year: Norway: 2008, rest of the countries: 2007. Data for the Netherlands only include 'current health expenditure'.

2. Percentage of the total population with additional private insurance besides the fundamental/basic health care coverage								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
Percentage with additional private insurance	Approx. 20(1)	3.9	3.5	11	12	20 – 24	96	88

Source: Questionnaires to health ministries in the countries, 2009.
Note: (1) In Denmark 983.000 in 2008 have additional private insurances and the average price per insured is around 1100 DKK. (2) The compulsory insurance in France, Netherlands and Germany is accounted as public financing because it is a compulsory insurance.

3. Life expectancy at birth and absolute change in life expectancy at birth from 2001 to latest year									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	77.0	79.9	78.9	78.2	78.2	78.5	78.3	79.2	77,6
Latest year	78.4	81.0	80.6	79.5	79.5	80.0	80.2	80.9	79,1
Change, absolute	1.4	1.1	1.7	1.3	1.3	1.5	1.9	1.7	1, 5
Change, per cent	1.8	1.4	2.2	1.7	1.7	1.9	2.4	2.1	1,9

Source: OECD Health Data 2009.
Note Data for latest year: France: 2008. Sweden, Netherlands, Denmark, Norway, Finland, Germany: 2007, United Kingdom: 2006. OECD-average 2007: Data for Italy is not available.

4. Daily smokers, percentage of population									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	29.5	18.9	30.0	23.8	27.0	24.7	34.0	27.0	26,7
Latest year	25	14.5	21.0	20.6	21.0	23.2	29.0	25.0	23,3
Change, absolute, per cent	-4.5	-4.4	-9.0	-3.2	-6.0	-1.5	-5.0	-2.0	-3,4
1980	50.5	32.4	36.0	26.1	39.0	28.5 (1)	43.0	30.0	-

Source: OECD Health Data 2009
Note: Data for latest year: Norway: 2008. Netherlands, United Kingdom, Finland: 2007. France, Denmark, Sweden:

2006. Germany: 2005. (1) Data for Germany is not from 2001 but from 1978.
 OECD average 1980: No OECD average has been drawn up as data are not available for a sufficient number of countries.

5. Alcohol consumption in liters per capita (age 15+)

	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	13.1	6.5	5.5	9.0	10.7	10.4	10.0	14.2	9,7
Latest year	12.1	6.9	6.6	10.5	11.2	9.9	9.6	13.0	9,8
Change, absolute	-1.0	0.4	1.1	1.5	0.5	0.1	-0.4	-1.2	0,1
Change, per cent	-7.6	6.2	20.0	16.7	4.7	1.0	-4.0	-8.5	0,8

Source: OECD Health Data 2009

Note: Data for latest year: Netherlands and France: 2006. Rest of the countries: 2007.

6. Overweight or obese population (BMI \geq 30), percentage of population

	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	9.5	9.2	8.3	11.4	22.0	11.5	9.3	9.0	13,1
Latest year	11.4	10.2	9.0	14.9	24.0	13.6	11.2	10.5	15,2
Change, absolute	1.9	1.0	0.7	3.5	2.0	2.1	1.9	1.5	2,1
Change, per cent	20.0	10.9	8.4	30.7	9.1	18.3	20.4	16.7	16,0

Source: OECD Health Data 2009

Note: Data for latest year: Netherlands, United Kingdom, Sweden, Finland: 2007. France: 2006. Norway, Denmark, Germany: 2005. OECD average 2007: Data for Australia is not available.

OECD average 2001: Data for Australia, Austria, Greece, Mexico, Slovak Republic, Portugal, and Poland are not available.

7. Mortality rates for ischemic heart disease, number of deaths per 100,000 population

	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	106.4	114.6	105.7	157.3	129.7	116.6	76.9	45.1	109,2
Latest year	67.8	93.1	70.9	126.0	88.6	92.5	48.0	35.0	93,0
Change, absolute	-38.6	-21.5	-34.8	-31.3	-41.1	-24.1	-28.9	-10.1	-16,2
Change, per cent	-36.3	-18.8	-32.9	-19.9	-31.7	-20.7	-37.6	-22.4	-14,8

Source: OECD Health Data 2009

Note: Data for latest year: Netherlands, United Kingdom, Finland: 2007: France, Denmark, Norway, Germany, Sweden: 2006. OECD average 2007: Data for Belgium and Turkey are not available. OECD average 2001: Data for Belgium and Turkey is not available.

8. Danish data for mortality rates for ischemic heart disease, number of deaths per 100,000 population

Year	1996	1998	2000	2002	2004	2006
Mortality rates	137	121	106	94	80	68

Source: OECD Health Data 2009

9. Mortality rates for acute myocardial infarction, number of deaths per 100,000 population

	Denmark	Sweden	Norway	Finland	United	Germany	Netherlands	France	OECD
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	k				Kingdom	y	lands		
2001	55.1	68.1	69.9	85.7	61.4	53.9	55.4	26.8	55,0
Latest year	33.9	52.2	46.0	55.5	37.6	44.2	33.2	19.5	42,0
Change, absolute	-21.2	-15.9	-23.9	-30.2	-23.8	-9.7	-22.2	-7.3	-13,0
Change, per cent	-38.5	-23.3	-34.2	-35.2	-38.8	-18.0	-40.1	-27.2	-23,6

Source: OECD Health Data 2009
Note: Data latest year: Netherlands, United Kingdom and Finland: 2007. France, Denmark, Norway, Germany and Sweden: 2006. OECD average 2007: Data for Belgium, Switzerland and Turkey are not available. OECD average 2001: Data for Belgium, Switzerland and Turkey are not available.

10. Danish data for mortality rates for acute myocardial infarction, number of deaths per 100,000 population						
Year	1996	1998	2000	2002	2004	2006
Mortality rates	66	52	54	46	42	34

Source: OECD Health Data 2009

11. Mortality rates for malignant neoplasms, number of deaths per 100,000 population									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	209.3	151.6	166.6	143.5	183.4	167.3	185.9	173.7	172,6
Latest year	199.4	146.8	154.8	132.6	170.7	156.6	175.6	162.6	161,6
Change, absolute	-9.9	-4.8	-11.8	-10.9	-12.7	-10.7	-10.3	-11.1	-11,0
Change, per cent	-4.7	-3.2	-7.1	-7.6	-6.9	-6.4	-5.5	-6.4	-6,4

Source: OECD Health Data 2009
Note: Data for latest year: Netherlands, United Kingdom, Finland: 2007. France, Denmark, Norway, Germany, Sweden: 2006. OECD average 2007: Data for Belgium, Turkey are not available. OECD average 2001: Data for Belgium, Turkey are not available.

12. Danish data for mortality rates for malignant neoplasms, number of deaths per 100,000 population						
Year	1996	1998	2000	2002	2004	2006
Mortality rates	216	212	213	201	200	199

Source: OECD Health Data 2009

13. Total expenditure on health as percentage of GDP									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	8.6	9.0	8.8	7.4	7.3	10.4	8.3	10.2	8,1
Latest year (2007)	9.8	9.1	8.9	8.2	8.4	10.4	9.8	11.0	8,9
Change, absolute, pct	1.2	0.1	0.1	0.8	1.1	0.0	1.5	0.8	0,8

Source: OECD Health Data 2009

14. Total expenditure on health as percentage of GDP									
	Denmark	Sweden	Norway	Finland	United	Germany	Netherla	France	OECD

	k				Kingdom	y	nds		
1970 (1)	7.9	6.8	4.4	5.5	4.5	6.0	6.9	5.4	-
1975	8.7	7.5	5.9	6.2	5.4	8.4	7	6.4	6,3
1980	8.9	8.9	7.0	6.3	5.6	8.4	7.4	7	6,6
1985	8.5	8.5	6.6	7.1	5.8	8.8	7.3	8.0	6,7
1990	8.3	8.2	8.0	7.7	7.6	8.2	8.3	8.4	6,9
1995	8.1	8.0	7.9	7.9	6.8	10.1	8.3	10.4	7,7
2000	8.3	8.2	8.4	7.2	7.0	10.3	8.0	10.1	7,8
2005	9.5	9.2	9.1	8.5	8.2	10.7	9.8	11.1	8,9

Source: OECD Health Data 2009

Note: (1) 1970: Denmark 1971, Netherlands 1972.

No OECD 1970 average has been drawn up as data are not available for a sufficient number of countries. OECD-average 1995: Data for Slovak Republic are not available. OECD average 1990: Data for Hungary, Slovak Republic are not available. OECD average 1985: Data for Czech Republic, Greece, Hungary, Italy, Mexico, Poland, and Slovak Republic are not available. OECD average 1980: Data for Czech Republic, Hungary, Italy, Mexico, Poland, Slovak Republic are not available. OECD average 1975: Data for Czech Republic, Greece, Hungary, Italy, Mexico, Poland, and Slovak Republic are not available.

15. Total expenditure on health per capita, DKK, PPP									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	24.297	24.621	31.666	19.061	18.962	26.901	24.219	25.574	20.245
Latest year (2007)	30.202	29.072	35.468	24.975	24.847	28.846	31.342	29.573	24.803
Change, absolute	5.905	4.451	3.802	5.914	5.885	1.945	7.123	3.999	4.558
Change, per cent	24.3	18.1	12.0	31.0	31.0	7.2	29.4	15.6	22,5

Source: OECD Health Data 2009

16. Remuneration of specialists, DKK exchange rate.								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
Latest year, DKK.	799.260	-	673.662	628.461	1.243.584	563.263	927.456	-
Latest year US\$	133.210	-	123.835	115.526	228.600	94.666	155.875	-
2001 US\$	81.190	-	63.886	56.246	108.939	-	135.843	-
Latest year in proportion to average earnings of production worker.	3.51	-	2.20	3.15	4.40	2.95	4.37	-
2001 in proportion to average earnings of production worker.	3.31	-	2.20	2.96	3.63	-	4.20	-

Source: OECD Health Data 2009

Note: (1) Data for latest year DKK: Germany, Netherlands: 2006. Denmark: 2005, Rest of the countries: 2007

Data 2001: Netherlands: 2003. United Kingdom: 2000. No OECD average has been drawn up as data are not available for a sufficient number of countries.

Data for latest year for average earnings production worker: Germany, Netherlands: 2006. Denmark: 2005, Rest of the countries: 2007.
Data for 2001 for average earnings production worker: Netherlands 2003. United Kingdom: 2000.

17. Remuneration of hospital nurses, DKK exchange rate								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
Latest year, DKK.	368.994	-	375.447	229.127	345.984	268.077	-	-
Latest year US\$	61.499	-	69.016	42.119	59.815	45.055	-	-
2001 US\$	38.989	-	33.266	22.614	34.242	-	-	-
Latest year in proportion to average earnings of production worker.	1.62	-	1.22	1.15	1.22	1.13	-	-
2001 in proportion to average earnings of production worker.	1.59	-	1.15	1.19	1.14	-	-	-

Source: OECD Health Data 2009
Note: Data for latest year: DKK: Germany: 2006. Denmark: 2005. Rest of the countries: 2007 Latest year US\$: Germany: 2006. Denmark: 2005 Rest of the countries: 2007
Data 2001 US\$: United Kingdom: 2000
Data for latest year for average earnings production worker: Germany: 2006. Denmark: 2005. Rest of the countries: 2007. Data 2001 for average earnings production worker: United Kingdom: 2000
No OECD average has been drawn up as data are not available for a sufficient number of countries.

18. Expenditure on hospitals' services, DKK, PPP									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	11.535	10.434	11.220	6.543	-	7.899	8.725	8.941	6.434
Latest year	13.362	13.008	12.085	8.450	-	8.263	10.699	10.189	8.807
Change, absolute	1.827	2.574	865	1.907	-	364	1.974	1.248	2.373
Change, per cent	15.84	24.67	7.71	29.15	-	4.61	22.62	13.96	36,9

Source: OECD Health Data 2009
Note: Data for latest year: Norway: 2006. Rest of the countries: 2007.
OECD average 2007: Data for Greece, Iceland, Italy, and United Kingdom are not available. OECD average 2001: Data for Austria, Belgium, Greece, Iceland, Ireland, Italy, New Zealand, Poland og United Kingdom are not available.

19. Expenditure on hospitals' services as percentage of GDP									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	4.1	3.8	3.1	2.5	-	3.1	3.0	3.6	3,0
Latest year	4.3	4.1	3.1	2.8	-	3.0	3.3	3.8	3,1
Change, absolute, per cent	0.2	0.3	0	0.3	-	-0.1	0.3	0.2	0,1

Source: OECD Health Data 2009

Note: Data for latest year: Norway: 2006. Rest of the countries: 2007
 OECD average 2007: Data for United Kingdom, Luxembourg, Italy, Ireland, Greece are not available,
 OECD average 2001: Data for United Kingdom, Luxembourg, Italy, Ireland, Greece are not available,

20. Expenditure on hospitals' services as percentage of total expenditures on health									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	47.5	42.4	35.4	34.3	-	29.4	36.0	35.0	37,9
Latest year	44.2	44.7	34.1	33.8	-	28.6	34.1	34.5	36,3
Change, absolute, per cent	-3.2	2.4	-1.4	-0.5	-	-0.7	-1.9	-0.5	-1,6

Source: OECD Health Data 2009

Note: Data for latest year: Norway: 2006. Rest of the countries: 2007

OECD average 2007: Data for United Kingdom, Luxembourg, Italy, Ireland and Greece are not available,

OECD average 2001: Data for United Kingdom, Poland, New Zealand, Iceland, Luxembourg, Italy, Ireland, Greece, Belgium and Austria are not available,

21. Total investment on medical facilities per capita, DKK, PPP									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	620	921	2.006	861	663	956	956	499	771
Latest year (2007)	1.292	1.253	2.222	1.439	1.175	998	2.525	861	1.071
Change, absolute	672	331	215	578	511	43	1.569	362	300
Change, per cent	108.4	36.0	10.7	67.1	77.1	4.4	164.2	72.5	38,9

Source: OECD Health Data 2009 OECD average 2001: Data for Switzerland og New Zealand are not available.

22. Number of full-time employed (FTE) persons employed in hospitals per 1,000 population								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
2001	16.9	-	17.6	14.6	-	11.3	12.3	16.6
Latest year	17.5	-	20.1	16.1	-	10.7	11.0	17.3
Change, absolute	0.6	-	2.5	1.5	-	-0.6	-1.3	0.7
Change, per cent	3.5	-	14.2	10.3	-	-5.3	-10.6	4.2

Source: OECD Health Data 2009 and the Danish National Board of Health (Denmark).

Note: Data for Denmark only include public hospitals. Data for latest year: Finland, Netherlands: 2006. 2001: France: 2002. Rest of the countries: 2007

No OECD average has been drawn up as data are not available for a sufficient number of countries.

23. Registered physicians, number per 1,000 population									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	4.5	4.6	-	3.1	-	4.6	3.3	4.1	3,6
Latest year	5.0	5.6	-	3.3	-	5.0	3.9	4.2	4,0
Change, absolute	0.5	0.9	-	0.2	-	0.5	0.7	0.1	0,4
Change, per cent	11.8	20.3	-	6.1	-	10.3	19.8	2.5	10,5

Source: OECD Health Data 2009
 Note: Data for latest year: Denmark, Sweden, Finland: 2006. Rest of the countries: 2007
 OECD average 2007: Data for Czech republic, Greece, Japan, Norway, Switzerland, Turkey and United Kingdom are not available. OECD average 2001: Data for Czech republic, Greece, Japan, Norway, Switzerland, Turkey, United Kingdom and Poland are not available.

24. Practicing specialist employed in the health care sector (excluding general practitioners), number per 1,000 population

	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	1.1	2.3	2.1	1.4	1.4	1.8	1.0	1.7	1,7
Latest year	1.2	2.6	2.2	1.6	1.8	2.0	1.0	1.7	1,8
Change, absolute	0.1	0.3	0.1	0.2	0.4	0.2	0.1	0.0	0,1
Change, per cent	10.5	12.3	4.9	10.6	30.1	11.5	5.2	1.2	5,9

Source: OECD Health Data 2009
 Note: Data for latest year: Denmark, Sweden and Finland: 2006. Estimate for Netherlands. Rest of the countries: 2007
 OECD average.2007: Data for Italy, Japan and Slovak Republic are not available. OECD average 2001: Data for Iceland, Ireland, Italy, Japan and Korea are not available.

25. Practicing general practitioners employed in the health care sector, number per 1,000 population

	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	0.73	0.55	0.91	0.75	0.64	1.49	0.46	1.64	0,84
Latest year	0.77	0.6	0.82	0.73	0.72	1.48	0.47	1.64	0,88
Change, absolute	0.04	0.05	-0.09	-0.02	0.08	-0.01	0.01	0.0	0,04
Change, per cent	5.5	9.1	-9.9	-2.7	12.5	-0.7	2.2	0.0	4,76

Source: OECD Health Data 2009
 Note: Data for latest year: Denmark, Sweden and Finland: 2006. Rest of the countries: 2007. OECD average 2007: Data for Japan and Slovak Republic are not available. OECD average 2001: Data for Japan, Korea and Spain are not available.

26. Practicing professional nurses employed in the health care sector, number per 1,000 population

	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	9.4	10.1	10.4	-	7.3	7.4	2.9	6.9	-
Latest year	9.5	10.8	15.8	-	8.1	7.8	2.5	7.7	7,1
Change, absolute	0.1	0.8	5.4	-	0.9	0.4	-0.4	0.8	0,6
Change, per cent	1.5	7.8	52.0	-	11.7	5.1	-12.2	11.9	9,4

Source: OECD Health Data 2009
 Note: Danish data includes areas which in Denmark are not covered by the health care sector. Data for latest year: Sweden and Denmark: 2006. Rest of the countries: 2007. Data 2001: Netherlands: 2004. OECD average 2007: Data for Belgium, Finland, Ireland, Italy, Slovak Republic, Switzerland and Turkey are not available.
 No OECD average for 2001 has been drawn up as data are not available for a sufficient number of countries.

27. Medical graduates, numbers per 100,000 population

	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
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2001	10.0	9.1	9.2	9.5	7.2	10.9	8.9	6.1	9,1
Latest year	16.0	10.0	10.6	6.9	10.2	11.6	12.3	5.5	9,9
Change, absolute	6.0	0.9	1.4	-2.6	3.0	0.7	3.4	-0.6	0,8
Change, per cent	60.0	9.9	15.2	-27.4	41.7	6.4	38.2	-9.8	8,8

Source: OECD Health Data 2009 and the Danish National Board of Health (Denmark).

Note: Data for latest year: France and Sweden: 2006. Rest of the countries: 2007

OECD average 2007: Data for Luxembourg and Mexico are not available.

OECD average 2001: Data for Luxembourg, Mexico and Poland are not available.

28. Doctors graduated in Denmark and emigration as percentage of all graduated								
Year	2001	2002	2003	2004	2005	2006	2007	2008
Graduated	547	636	711	773	818	858	875	808
Emigrated	49	50	57	61	76	95	124	102
Emigration in per cent	9 per cent	8 per cent	8 per cent	8 per cent	9 per cent	11 per cent	14 per cent	13 per cent

Source: the Danish National Board of Health.

29. Doctors graduated in Denmark with Nordic citizenship (not Danish) and emigration as percentage of these								
Year	2001	2002	2003	2004	2005	2006	2007	2008
Graduated	14	22	13	39	56	72	109	130
Emigrated	7	12	8	23	38	48	75	74
Emigration in per cent	50 per cent	55 per cent	62 per cent	59 per cent	68 per cent	67 per cent	69 per cent	57 per cent

Source: the Danish National Board of Health.

30. Nursing graduates, numbers per 100,000 population									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	38.6	33.7	73.7	61.6	24.5	25	36.8	23.4	34,9
Latest year, (2007)	41.2	49.9	78.5	49.8	35.1	23	36.1	35.1	35,4
Change, absolute	2.6	16.2	4.8	-11.8	10.6	-2.0	-0.7	11.7	0,5
Change, per cent	6.7	48.1	6.5	-19.2	43.3	-8.0	-1.9	50.0	1,3

Source: OECD Health Data 2009

Note: For Denmark and Germany data only includes "professional nurses". Data for latest year: Sweden: 2006. 2001: United Kingdom: 2002 Rest of the countries: 2007

OECD average 2007: Data for Mexico is not available.

OECD average 2001: Data for Italy, Mexico, Poland, Turkey and United Kingdom are not available.

31. Foreign-trained physicians as percentage of registered physicians								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
2001	-	13,5	-	5,3	26,5	-	-	2,2
Latest year (2007)	8,8	19,6	-	11,4	31,4	-	6,3	3,1
Change, absolute	-	6,1	-	6,1	4,9	-	-	0,9
Change, per cent	-	45,2	-	115,1	18,5	-	-	40,9

Source: OECD Health Data 2009

Note: Data for latest year: Sweden, Denmark, Netherlands, Finland: 2006. Rest of the countries: 2007

No OECD average has been drawn up as data are not available for a sufficient number of countries.

32. Number of acute-care beds in hospitals, per 1,000 population

	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	3.4	2.3	3.1	4.0	3.0	6.3	3.3	4.0	4,1
Latest year (2007)	2.9	2.1	2.9	3.7	2.6	5.7	3.0	3.6	3,8
Change, absolute	-0.5	-0.2	-0.2	-0.3	-0.4	-0.6	-0.3	-0.4	-0,3
Change, per cent	-14.7	-8.7	-6.5	-7.5	-13.3	-9.5	-9.1	-10.0	-6,6

Source: OECD Health Data 2009

Note: OECD average 2001: Data for Luxembourg, Iceland and New Zealand are not available, OECD average 2007: Data for Iceland and New Zealand are not available.

33. Number of psychiatric care beds in hospitals, per 1,000 population

	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	0.8	0.6	-	-	0.9	0.4	-	1.0	0,8
Latest year (2007)	0.6	0.5	0.6	-	0.7	0.5	1.3	0.9	0,7
Change, absolute	-0.2	-0.1	-	-	-0.2	0.1	-	-0.1	-0,1
Change, per cent	-25.0	-16.7	-	-	-22.2	25.0	-	-10.0	-11,9

Source: OECD Health Data 2009

Note: OECD average 2001: Data for Finland, Iceland, Korea, Luxembourg, Netherlands, New Zealand, Norway, Poland, Switzerland and Turkey are not available. OECD average 2007: Data for Finland, Iceland, New Zealand and Switzerland are not available.

34. Number of Computed Tomography scanners, per one million population

	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	13.2	-	-	13.7	5.8	-	-	8.9	15,8
Latest year (2007)	17.4	14.2	-	16.4	7.6	-	8.4	10.3	22,7
Change, absolute	4.2	-	-	2.7	1.8	-	-	1.4	6,9
Change, per cent	31.8	-	-	19.7	31.0	-	-	15.7	43,3

Source: OECD Health Data 2009

Note: Data for latest year: Netherlands, United Kingdom: 2006. Sweden: 1999. Rest of the countries: 2007

OECD average 2007: Data for Norway and Germany are not available. OECD average 2001: Data for Germany, Greece, Ireland, Italy, Japan, Netherlands, New Zealand, Portugal, Slovak Republic, Sweden and Turkey are not available.

35. Number of Magnetic Resonance Imaging units, per one million population

	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	5.4	-	-	11.0	5.2	-	-	2.4	-

Latest year (2007)	10.2	7.9	-	15.3	8.2		6.6	5.7	11,0
Change, absolute	4.8	-	-	4.3	3.0		-	3.3	-
Change, per cent	88.9	-	-	39.1	57.7		-	137.5	-

Source: OECD Health Data 2009

Note: Data for latest year: Denmark: 2004. Netherlands: 2005. Sweden: 1999. Rest of the countries: 2007

OECD average 2007: data for Norway and Germany are not available. No OECD average for 2001 has been drawn up as data are not available for a sufficient number of countries.

36. Number of Positron Emission Tomography scanners, per one million population								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
2001	-	-	-	0.4	-	0.6	-	0.1
Latest year	3.7	-	-	0.9	0.5	1.0	1.0	1.0
Change, absolute	3.7	-	-	0.5	-	0.4	-	0.9
Change, per cent	-	-	-	125.0	-	66.7	-	900.0

Source: OECD Health Data 2009

Note: Data for latest year: Finland: 2006. Netherlands, United Kingdom: 2005. Rest of the countries: 2007

No OECD average has been drawn up as data are not available for a sufficient number of countries.

37. Total surgical in-patients, per 1,000 population									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	72.7	54.7	-	56.1	61.6	98.1	37.3	-	61,8
Latest year, (2007)	76.1	73.4	-	60.0	72.3	66.6	39.8	-	71,2
Change, absolute	3.4	18.7	-	3.9	10.7	-31.5	2.5	-	9,4
Change, per cent	4.7	34.2	-	7.0	17.4	-32.1	6.7	-	15,2

Source: OECD Health Data 2009

Note: OECD average 2001: Data for Switzerland, Slovak Republic, Poland, Norway, New Zealand, Korea, Japan, Iceland, Hungary and France are not available.

38. Number of discharges, in-patients, per 1,000 population									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	171.8	162.6	159.8	213.5	119.9	200.5	91.3	267.7	155,1
Latest year, (2007)	169.8	164.8	172.4	190.1	125.5	226.9	109.3	273.8	157,8
Change, absolute	-2.0	2.2	12.6	-23.4	5.6	26.4	18.0	6.1	2,7
Change, per cent	-1.2	1.4	7.9	-11.0	4.7	13.2	19.7	2.3	1,7

Source: OECD Health Data 2009

Note: France includes admissions lasting less than 24 hours, resulting in a higher number of discharges. Finland, Norway and Sweden exclude discharges of healthy babies born at the hospital, which reduces the number of discharges. OECD average 2001: Data for Czech Republic, Hungary, Korea, Japan and Poland are not available.

39. Acute care occupancy rate, percentage									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	84.0	-	87.2	-	83.3	80.1	66.0	75.2	75,4
Latest year, (2007)	84.0	-	88.0	-	83.3	76.0	63.9	74.0	75,3
Change, absolute, per cent	0.0	-	0.8	-	0.0	-4.1	-2.1	-1.2	-0,1

Source: OECD Health Data 2009
Note: Data covers both public and private hospitals. Danish data only covers public hospitals.
Data for latest year: Data for Denmark: 2001. Data for Netherlands: 2005. Rest of the countries: 2007
OECD average 2007: Data for Finland, Iceland, New Zealand and Sweden are not available.. OECD average 2001: Data for Finland, Iceland, Luxembourg, New Zealand and Sweden are not available.

40. Number of total surgical day-cases, per 1,000 population								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
2001	57.8	-	-	32.0	73.4	11.6	30.1	-
Latest year (2007)	74.2	-	-	40.5	86.0	20.6	40.5	-
Change, absolute	16.4	-	-	8.5	12.6	9	10.4	-
Change, per cent	28.4	-	-	26.6	17.2	77.6	34.6	-

Source: OECD Health Data 2009
Note: Data 2001: Germany: 2003. No OECD average has been drawn up as data are not available for a sufficient number of countries..

41. Yearly increase in productivity at Danish Hospitals, percentage				
Year	2004	2005	2006	2007
Increase in productivity, per cent	2.4	1.8	1.9	1.4

Source: Danish Regions, Ministry of Finance, the National Board of Health, Ministry of Health and Prevention.

42. Number of surgical procedures per full-time employed in hospitals								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
2001	7.7	-	-	6.0	-	9.4	5.5	-
Latest year (2007)	8.6	-	-	6.4	-	8.1	7.2	-
Change, absolute	0.9	-	-	0.4	-	-1.3	1.7	-
Change, per cent	11.7	-	-	6.7	-	-13.8	30.9	-

Source: OECD Health Data 2009 and the Danish National Board of Health (Denmark full-time employed in public hospitals).
Notes: Number of surgical procedures includes in-patient and day-cases. Data Latest year: Finland: 2006. Data 2001: Germany: 2002. No OECD average has been drawn up as data are not available for a sufficient number of countries.

43. Number of discharges per full-time employed in hospitals								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
2001	10.2	-	9.1	14.6	-	17.7	7.4	16.0
Latest year	9.7	-	8.6	12.2	-	21.1	9.7	15.8

(2007)									
Change, absolute	-0.5	-	-0.5	-2.4	-	3.4	2.3	-0.2	
Change, per cent	-4.9	-	-5.5	-16.4	-	19.2	31.1	-1.3	

Source: OECD Health Data 2009 and the Danish National Board of Health (Denmark full-time employed in public hospitals).
Data latest year: Denmark (discharges), Finland and Netherlands: 2006. Otherwise: 2007. Data 2001: Germany: 2002
No OECD average has been drawn up as data are not available for a sufficient number of countries.

44. Average length of stay by in-patients and acute care, days									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	3,8	5,0	5,8	5,0	8,5	9,0	8,6	5,7	7,4
Latest year	3,5	4,5	5,0	4,6	7,2	7,8	6,3	5,3	6,6
Change, absolute	-0,3	-0,5	-0,8	-0,4	-1,3	-1,2	-2,3	-0,4	-0,8
Change, per cent	-7,9	-10,0	-13,8	-8,0	-15,3	-13,3	-26,7	-7,0	-10,1

Source: OECD Health Data 2009
Note: Data for Denmark only include public hospitals. Data latest year: Denmark: 2005. Otherwise: 2007

45. Surgical day cases in percentage of total surgical procedures									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
2001	44.3	-	-	36.4	54.4	9.5	44.7	-	
Latest year, (2007)	49.4	-	-	40.3	54.3	23.6	50.5	-	
Change, absolute, per cent	5.1	-	-	3.9	-0.1	14.1	5.8	-	

Source: OECD Health Data 2009
Notes: Data 2001: Germany: 2002 No OECD average has been drawn up as data are not available for a sufficient number of countries..

46. In-hospital case-fatality rates within 30 days after admission for acute myocardial infarction (AMI), percentage									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
Latest year, (2007)	2.9	2.9	3.2	4.9	6.3	-	6.6	-	4,9

Source: Health at a Glance 2009.
Data Latest year: Netherlands: 2005. Otherwise: 2007

47. In-hospital case-fatality rates within 30 days after admission for ischemic stroke, percentage									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
Latest year, (2007)	3.1	3.9	3.3	3.2	9.0	3.8	5.9	-	5,0

Source: Health at a Glance 2009
Note: Data Latest year: Netherlands: 2005. Otherwise: 2007

48. In-hospital case-fatality rates within 30 days after admission for hemorrhagic stroke, percentage									
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	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
Latest year, (2007)	16.7	12.8	13.7	9.5	26.3	14.5	25.2	-	19,8

Source: Health at a Glance 2009
Note: Data Latest year: Netherlands: 2005. Otherwise: 2007

49. Colorectal cancer, five-year relative survival rate, 2002-2007, percentage									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
Latest period	54.4	60.1	57.8	62.0	51.6	-	58.1	-	57,4

Source: Health at a Glance 2009
Note: Latest period: Finland (2002-05), Sweden (2003-08), Norway (2001-06), United Kingdom (2001-06), Netherlands (2001-06). There are no data for 2002-2007 for France. There is no national rate for Germany.

50. Breast cancer five-year relative survival rate, 2002-2007, percentage									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
Latest period, 2002-2007	82.4	86.1	81.9	86.0	78.5	-	85.2	82.6	81,2

Source: Health at a Glance 2009
Note: France 1997-2002. There is no national rate for Germany.

51. Cervical cancer five-year relative survival rate, 2002-2007, percentage									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	OECD
Latest period, 2002-2007	61.3	65.8	65.9	69.0	59.4	-	69.0	67.3	65,7

Source: Health at a Glance 2009.
Note: France 1997-2002. There is no national rate for Germany.

52. Average waiting time for elective treatment of coronary by-pass, months				
	Denmark	Finland	England	Netherlands
< 1 month	X	X		
1-3 months			X	X
4-6 months				

Source: Questionnaires to Health Ministries in the countries, May-August 2009
Notes: Only elective surgeries. Netherlands, March 2008 (thorax operation). Denmark, 2008. Finland, 2007. England, 2007/2008.

53. Average waiting time for elective treatment of breast cancer, months		
	Denmark	Netherlands
< 1 month	X	X
1-3 months		
4-6 months		

Source: Questionnaires to Health Ministries in the countries, May-August 2009
Note: Netherlands, May 2008. Denmark: 2008. ICD-10 codes: C50.0-C50.9.

54. Average waiting time for elective treatment of hip replacement, months				
	Denmark	Finland	England	Netherlands
1-3 months	X			X
4-6 months		X	X	
> 6 months				

Source: Questionnaires to Health Ministries in the countries, May-August 2009
Note: Netherlands, May 2008 (orthopaedic surgery). Denmark, 2008. Finland, 2007. England, 2007/2008.

55. Proportion of out-patients who are "satisfied" with hospital care, percentage								
	Denmark	Sweden	Norway	Finland	England	Germany	Netherlands	France
Latest year	94,9	85,0	-	-	93,0	-	-	88,0

Source: Questionnaires to Health Ministries in the countries, May-August 2009
Note: Denmark (2009), Sweden (2007), England (2004/2005). French data includes both in-patients and out-patients (2006).

56. Proportion of in-patients who are "satisfied" with hospital care, percentage								
	Denmark	Sweden	Norway	Finland	England	Germany	Netherlands	France
Latest year	89,9	-	86,0	-	93,0	-	-	88,0

Source: Questionnaires to Health Ministries in the countries, May-August 2009
Note: Denmark (2009), Sweden (2007), England (2004/2005). French data includes both in-patients and out-patients (2006).

57. Proportion of population with unmet needs for medical examination, percentage									
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France	EU-25
Latest year (2006)	0.2	2.9	1.4	2.5	1.9	5.2	0.4	1.5	3,5

Source: Eurostat (EU-silc survey)
Note: EU-25 average is applied, because there are only data for EU-countries.

58. Out-of-pocket-payment on hospital care								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
No out-of-pocket-payment	X		X (in-patient)		X*			
Out-of-pocket-payment		X	X (out-patients)	X		X	X	X

Source: Questionnaires to Health Ministries in the countries, 2009; MISSOC-database, 2007; Descriptions of Health Care Systems: Denmark, France, Germany, the Netherlands, Sweden and the United Kingdom, The Commonwealth Fund, February 2008
Note: *Out-of-pocket payment is possible if the patient requests additional facilities or treatments which are not clinically necessary.

59. Is national healthcare legislation explicitly expressed in terms of patients' right?								
	Denmark	Sweden	Norway	Finland	England	Germany	Netherlands	France
Yes, in judicial binding legislation	X	X	X	X		X	X	X
No, but					X			

Yes	X	X	X	X		X		X
No, but the system offers various kinds of judicial assistance free of charge								
No					X		X	
Source: Questionnaires to Health Ministries in the countries, May-August 2009.								

64. Access on internet to hospital quality ranking issued nationally aimed at non health professionals								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
Quantitative rankings	X		X		X		X	
Qualitative or limited quantitative rankings						X		X
No access		X		X				
Source: Questionnaires to Health Ministries in the countries, May-August 2009.								

65. Access on internet to comparable hospital and treatment specific national issued information on waiting times								
	Denmark	Sweden	Norway	Finland	United Kingdom	Germany	Netherlands	France
Yes	X	X	X		X		X	
No				X		X		X
Source: Questionnaires to Health Ministries in the countries, May-August 2009.								

66. Assistance from the public health authorities/the health insurer before or during their hospital treatment on deriving their various patients' rights								
	Denmark	Sweden	Norway	Finland	England	Germany	Netherlands	France
Yes, on hospital level				X	X	X		
Yes, on regional level	X	X	X					
Limited assistance or through patient organisations							X	X
Source: Questionnaires to Health Ministries in the countries, May-August 2009.								