

## Eurostat – Health care facilities

### Hospital beds (HP.1)

Total hospital beds	<p>Total hospital beds are all hospital beds which are regularly maintained and staffed and immediately available for the care of admitted patients.</p> <p><u>Inclusion</u></p> <ul style="list-style-type: none"> <li>- Beds in all hospitals, including general hospitals (HP.1.1), mental health and substance abuse hospitals (HP.1.2), and other specialty hospitals (HP.1.3)</li> <li>- Occupied and unoccupied beds</li> </ul> <p><u>Exclusion</u></p> <ul style="list-style-type: none"> <li>- Surgical tables, recovery trolleys, emergency stretchers, beds for same-day care, cots for healthy infants</li> <li>- Beds in wards which were closed for any reason</li> <li>- Provisional and temporary beds</li> <li>- Beds in nursing and residential care facilities (HP.2).</li> </ul>
Curative (acute) care beds	<p>Curative care (acute care) beds in hospitals (HP.1) are hospital beds that are available for curative care (HC.1 in the SHA classification excluding psychiatry).</p> <p><u>Inclusion</u></p> <ul style="list-style-type: none"> <li>- Beds accommodating patients where the principal clinical intent is to do one or more of the following: manage labour (obstetric), cure non-mental illness or provide definitive treatment of injury, perform surgery, relieve symptoms of non-mental illness or injury (excluding palliative care), reduce severity of non-mental illness or injury, protect against exacerbation and/or complication of non-mental illness and/or injury which could threaten life or normal functions, perform diagnostic or therapeutic procedures</li> </ul> <p><u>Exclusion</u></p> <ul style="list-style-type: none"> <li>- Beds allocated for other functions of care (such as psychiatric care, rehabilitation, long-term care and palliative care)</li> <li>- Beds in mental health and substance abuse hospitals (HP.1.2)</li> <li>- Beds for rehabilitation (HC.2)</li> <li>- Beds for palliative care.</li> </ul>
Psychiatric care beds	<p>Psychiatric care beds in hospitals (HP.1) are hospital beds accommodating patients with mental health problems (part of HC.1 in the SHA classification).</p> <p><u>Inclusion</u></p> <ul style="list-style-type: none"> <li>- All beds in mental health and substance abuse hospitals (HP.1.2)</li> <li>- Beds in psychiatric departments of general hospitals (HP.1.1) and of specialty (other than mental health and substance abuse) hospitals (HP.1.3)</li> </ul> <p><u>Exclusion</u></p> <ul style="list-style-type: none"> <li>- Beds allocated to non-mental curative care (part of HC.1)</li> <li>- Beds allocated to long-term nursing care in hospitals (HC.3)</li> <li>- Beds for rehabilitation (HC.2)</li> <li>- Beds for palliative care.</li> </ul>
Long-term care beds (excl. psychiatric beds)	<p>Long-term care beds in hospitals (HP.1) are hospital beds accommodating patients requiring long-term care due to chronic impairments and a reduced degree of independence in activities of daily living.</p> <p><u>Inclusion</u></p> <ul style="list-style-type: none"> <li>- Beds in long-term care departments of general hospitals (HP.1.1)</li> <li>- Beds for long-term care in specialty (other than mental health and substance abuse) hospitals (HP.1.3)</li> <li>- Beds for palliative care</li> </ul> <p><u>Exclusion</u></p> <ul style="list-style-type: none"> <li>- Beds in mental health and substance abuse hospitals (HP.1.2)</li> <li>- Beds for rehabilitation (HC.2).</li> </ul>
Other hospital beds	<p>All other beds in hospitals (HP.1) not elsewhere classified.</p> <p><u>Inclusion</u></p> <ul style="list-style-type: none"> <li>- Beds for rehabilitation (HC.2).</li> </ul>

The definition of hospitals (HP.1) follows the International Classification for Health Accounts – Providers of health care (ICHA-HP) of the [System of Health Accounts](#). The detailed definitions are available in [CIRCA](#).

The data refer to the annual average (unless otherwise indicated).

## Country specific notes

[Belgium](#), [Bulgaria](#), [Czech Republic](#), [Denmark](#), [Germany](#), [Estonia](#), [Ireland](#), [Greece](#), [Spain](#), [France](#), [Italy](#), [Cyprus](#), [Latvia](#), [Lithuania](#), [Luxembourg](#), [Hungary](#), [Malta](#), [Netherlands](#), [Austria](#), [Poland](#), [Portugal](#), [Romania](#), [Slovenia](#), [Slovakia](#), [Finland](#), [Sweden](#), [United Kingdom](#), [Croatia](#), [former Yugoslav Republic of Macedonia](#), [Turkey](#), [Iceland](#), [Norway](#), [Switzerland](#).

### Belgium

#### Total hospital beds:

Source of data: Federal Public Service – Health, Food Chain Safety and Environment, DG1 Organisation and Planning, Datamanagement; Central Institution Database - Centraal Ziekenhuisbestand (CZB).

Reference period: 1<sup>st</sup> of January.

Coverage:

- Included in the calculation are all beds in acute care hospital, geriatric hospitals, specialised hospitals, psychiatric hospitals, psychiatric care centres and protected lodging initiatives.

Break in time series:

- From 2006 Psychiatric care centres & protected lodging initiatives are taken out. This explains the fall in psychiatric care beds in 2006.

#### Curative (acute) care beds in hospitals:

Source of data: Federal Public Service – Health, Food Chain Safety and Environment, DG1 Organisation and Planning, Datamanagement; Central Institution Database - Centraal Ziekenhuisbestand (CZB).

Reference period: 1<sup>st</sup> of January.

Coverage:

- Bed indexes included are:

(B) treatment department “TBC”

(C) diagnosis and surgical treatment department

(D) diagnosis and medical treatment department

(E) paediatrics

(H) single hospitalisation,

(H\*) mixed hospitalisation

(L) contagious diseases

(M) maternity

(NIC) intensive neonatal care and

(G) geriatrics in acute hospitals

#### Psychiatric care beds in hospitals:

Source of data: Federal Public Service – Health, Food Chain Safety and Environment, DG1 Organisation and Planning, Datamanagement; Central Institution Database - Centraal Ziekenhuisbestand (CZB).

Reference period: 1<sup>st</sup> of January.

Coverage:

- Beds indexes included in the calculation up to 2005 are:

(A) neuropsychiatry,

(A1) day care in neuropsychiatry

(A2) night care in neuropsychiatry

(K) infantile neuropsychiatry

(K1) day care in infantile neuropsychiatry

(K2) night care in infantile neuropsychiatry

(Q) psychiatric care institutions  
(IHP) initiative for a protected inhabitat  
(TFB) familial placing  
(TFP) places in familial milieu and  
(VP) psycho-geriatrics.

- The increase in psychiatric care beds in 1996 is due to the creation of beds in psychiatric care institutions and initiatives for a protected inhabitat.

Break in time series:

- From 2006, data exclude beds in psychiatric care institutions and initiatives for a protected inhabitat.

Long-term care beds in hospitals (excluding psychiatric beds):

Source of data: Federal Public Service – Health, Food Chain Safety and Environment, DG1 Organisation and Planning, Datamanagement; Central Institution Database - Centraal Ziekenhuisbestand (CZB).

Reference period: 1<sup>st</sup> of January.

Coverage:

- Beds indexes included in the calculation are:

(G) Geriatrics only in geriatrics hospitals

(S4) Palliative care

(S5) chronic multi pathology

(S9) chronic affection and

(V) long-term affection treatment.

- In 1995, there is a decrease in long-term care beds in hospital due to the disappearance of V beds (long-term affection treatment).

Other hospital beds:

Source of data: Federal Public Service – Health, Food Chain Safety and Environment, DG1 Organisation and Planning, Datamanagement; Central Institution Database - Centraal Ziekenhuisbestand (CZB).

Reference period: 1<sup>st</sup> of January.

Coverage:

- Beds indexes included in the calculation are:

(S) specialisation

(S1) cardio-pulmonary affections

(S2) affection of locomotive apparatus and

(S3) neurological affections.

- There was an increase of these beds in 1995.

*Notes updated: 2010*

## **Bulgaria**

Total hospital beds:

Source of data: National Statistical Institute, National Centre for Health Information at the Ministry of Health

Reference period: 31st of December

Coverage: All disclosed beds in all types of hospitals are included. Dispensaries with beds are also included. Dispensaries are medical establishments in which doctors with the assistance of other personnel actively find, diagnose, treat and periodically observe patients with psychiatric, lung, dermato-venerological and oncological diseases.

In 2005, data on beds by type are revised in order to provide harmonised data for psychiatric beds.

#### Curative (acute) care beds:

Source of data: National Statistical Institute, National Centre for Health Information at the Ministry of Health

Reference period: 31st of December

#### Psychiatric care beds:

Source of data: National Statistical Institute, National Centre for Health Information at the Ministry of Health

Reference period: 31st of December

Coverage: Psychiatric care beds in HP.1 Hospitals include all psychiatric care beds in hospitals and in psychiatric dispensaries; 2001-2003: Data for psychiatric care beds are revised. The revision was done in order to provide the harmonised data and the psychiatric beds from specialised dispensaries are also included.

Break in time series: 2005: Beds for long term psychiatric care at Mental health hospitals (HP 1.2) are excluded from Long term care beds and are included in Psychiatric care beds. Beds for physiotherapy and rehabilitation at Mental health hospitals (HP 1.2) are excluded from Other beds and are included in Psychiatric care beds.

#### Long-term care beds (excl. psychiatric beds):

Source of data: National Statistical Institute, National Centre for Health Information at the Ministry of Health

Reference period: 31st of December

Coverage: beds for further treatment and continuous treatment are included; 2001 and 2002: data on long-term care beds are not available as a separate numbers and are incl. in the number of other beds in hospitals.

Break in time series: 2005: Beds for long term psychiatric care at Mental health hospitals (HP 1.2) are excluded from Long term care beds and are included in Psychiatric care beds.

#### Other hospital beds:

Source of data: National Statistical Institute, National Centre for Health Information at the Ministry of Health

Reference period: 31st of December

Coverage: beds for physiotherapy and rehabilitation are included. 2001 and 2002: data on long term care beds are also included.

Break in time series: 2005: Beds for physiotherapy and rehabilitation in pulmonary, dermatovenerological and oncological dispensaries are included in Other beds in Hospitals in order to provide harmonised data.

*Notes updated: 2010*

## **Czech Republic**

#### Total hospital beds:

Source of data: Institute of Health Information and Statistics of the Czech Republic; Survey on bed resources of health establishments and their exploitation.

Reference period: end of the year.

Coverage:

- Till 1999 data covers only establishments of the Health Sector. Since 2000, data covers all sectors.

- Providers: Hospitals and Specialized therapeutic institutes (excluding Balneologic institutes, Convalescent homes for children, Institutes for long-term patients and Hospices).

- Beds: All available beds excluding newborns' cots.

Break in time series: 2000.

#### Curative (acute) care beds in hospitals:

Source of data: Institute of Health Information and Statistics of the Czech Republic; Survey on bed resources of health establishments and their exploitation.

Reference period: end of the year.

Coverage:

- Till 1999 data covers only establishments of the Health Sector. Since 2000, data covers all sectors.

- Curative care beds encompass beds in University and General hospitals. Beds in departments and workplaces of aftercare and nursing care, beds in psychiatric departments (wards) and beds for healthy neonates are excluded.

- The above bed counts do not include provisional beds, beds for accompanying persons and temporary beds (for less than 24 hours: day care beds, instrument beds such as dialysis beds, delivery beds).

- When an entire ward is closed for a long period of time these beds are not counted.

Break in time series: 2000.

#### Psychiatric care beds in hospitals:

Source of data: Institute of Health Information and Statistics of the Czech Republic; Survey on bed resources of health establishments and their exploitation.

Reference period: end of the year.

Coverage:

- Till 1999 data covers only establishments of the Health Sector. Since 2000, data covers all sectors.

- Psychiatric care beds encompass beds in Psychiatric institutes and beds in psychiatric departments (wards) of University and General hospitals.

Break in time series: 2000.

#### Long-term care beds in hospitals (excluding psychiatric beds):

Source of data: Institute of Health Information and Statistics of the Czech Republic; Survey on bed resources of health establishments and their exploitation.

Reference period: end of the year.

Coverage:

- Till 1999 data covers only establishments of the Health Sector. Since 2000, data covers all sectors.

- Long term care beds encompass beds in departments and workplaces of after-care and nursing care in University and General hospitals (existing since 1995).

Break in time series: 2000.

#### Other hospital beds:

Source of data: Institute of Health Information and Statistics of the Czech Republic; Survey on bed resources of health establishments and their exploitation.

Reference period: end of the year.

Coverage:

- Till 1999 data covers only establishments of the Health Sector. Since 2000, data covers all sectors.

- Other beds encompass beds in Institutes for TB & respiratory diseases, Rehabilitation institutes, Other specialised therapeutic institutes and Other bed care health establishments.

Break in time series: 2000.

*Notes updated: 2010*

## **Denmark**

### Total hospital beds:

Source of data: National Board of Health (2010: internal hospital beds database has been used)

Curative (acute) care beds:

Source of data: National Board of Health (2010: internal hospital beds database has been used)

Psychiatric care beds:

Source of data: National Board of Health, The National Patient Register (the publication "Hospital statistics 2004").

National Board of Health (2010: internal hospital beds database has been used)

Coverage: Beds in private hospitals are not included.

Break in the series: The reason for the large decrease is that before 1987, psychiatric residential home beds are included in the number of psychiatric care beds (it is not possible to exclude these beds before 1987).

Long-term care beds (excl. psychiatric beds):

Data not available.

Other hospital beds:

Data not available.

*Notes updated: 2010*

## **Germany**

Total hospital beds:

Source of data: Federal Statistical Office, Hospital statistics - basic data, Fachserie 12, Reihe 6.1.1, 6.1.2.

<http://www.destatis.de> or <http://www.gbe-bund.de>.

Coverage:

- Total hospital beds comprise beds in all types of hospitals (HP1.1, 1.2 and 1.3) in all sectors (public, not-for-profit and private).
- Included are beds in general hospitals, mental health hospitals and prevention and rehabilitation homes.
- Beds in long-term-nursing care facilities are excluded.
- Costs for healthy infants, recovery trolleys, emergency stretchers, surgical tables and beds for same-day care and palliative care are also not included.

Curative (acute) care beds in hospitals:

Source of data: Federal Statistical Office, Hospital statistics - basic data, Fachserie 12, Reihe 6.1.1.

<http://www.destatis.de> or <http://www.gbe-bund.de>.

Coverage:

- Acute care beds comprise beds in general hospitals (HP.1.1) in all sectors (public, not-for-profit and private).
- Beds in mental health hospitals, in prevention and rehabilitation homes and beds in long-term nursing care facilities are excluded.
- Costs for healthy infants, recovery trolleys, emergency stretchers, surgical tables and beds for same-day care and palliative care are also not included.
- At regional level, for reference period 1993 until 1999 data on acute care beds for the federal states Berlin, Brandenburg, Bremen, Mecklenburg-Vorpommern and Saarland are under nondisclosure.

Psychiatric care beds in hospitals:

Source of data: Federal Statistical Office, Hospital statistics - basic data, Fachserie 12, Reihe 6.1.1.

<http://www.destatis.de> or <http://www.gbe-bund.de>.

Coverage:

- Psychiatric care beds in hospitals comprise beds in mental health hospitals (HP1.2) in all sectors (public, not-for-profit and private).
- In German "mental health hospitals" mean hospitals exclusively with psychiatric, psychotherapeutical or psychiatric, psychotherapeutical and neurological beds.
- Beds in psychiatric departments in other types of hospitals e.g. general hospitals (HP1.1) or in prevention and rehabilitation homes (HP1.3) are excluded.

Break in time series:

- For the years 2002 and 2004 hospitals exclusively with neurological beds were also included. Before 2002 and after 2004 hospitals exclusively with neurological beds are reported under general hospitals.
- At regional level, for reference period 1993 until 1999 data on acute care beds for the federal states Berlin, Brandenburg, Bremen, Mecklenburg-Vorpommern and Saarland are under nondisclosure.

Long-term care beds in hospitals (excluding psychiatric beds):

Data not available.

Other hospital beds:

Source of data: Federal Statistical Office, Hospital statistics - basic data, Fachserie 12, Reihe 6.1.2.

<http://www.destatis.de> or <http://www.gbe-bund.de>.

- Other hospital beds comprise beds in prevention and rehabilitation homes (HP1.3) in all sectors (public, not-for-profit and private).
- Beds in general hospitals, mental health hospitals and beds in long-term nursing care facilities are excluded.
- At regional level, for reference period 1993 until 1999 data on acute care beds for the federal states Berlin, Brandenburg, Bremen, Mecklenburg-Vorpommern and Saarland are under nondisclosure.

*Notes updated: 2010*

## **Estonia**

Total hospital beds:

Source of data: Since 1.01.2008 National Institute for Health Development, Department of Health Statistics; Data from routinely collected health care statistics submitted by health care providers (monthly statistical report "Hospital beds and hospitalization")

Reference period: 31st December

Coverage: All hospitals HP.1 (public and private sector) are included.

Military hospital beds are excluded.

From the hospital beds are also excluded cots for neonates; day beds; provisional and temporary beds, beds in storerooms.

Beds in welfare institutions are excluded.

At year's end 2005 the number of beds is smaller: certain number of beds was closed because of shortage of finances.

Curative (acute) care beds:

Source of data: Since 1.01.2008 National Institute for Health Development, Department of Health Statistics; Data from routinely collected health care statistics submitted by health care providers (monthly statistical report "Hospital beds and hospitalization")

Reference period: 31st December

Coverage: All hospitals HP.1 (public and private sector) are included.

Military hospital beds are excluded.

From the hospital beds are also excluded cots for neonates; day beds; provisional and temporary beds, beds in storerooms.

Beds in welfare institutions are excluded.

Beds for rehabilitation (medical care provided by hospitals) are included to acute care beds.

Beds for rehabilitation are included to curative care beds.

Beds for psychiatric, tuberculosis and long-term care beds are excluded.

#### Psychiatric care beds:

Source of data: Since 1.01.2008 National Institute for Health Development, Department of Health Statistics; Data from routinely collected health care statistics submitted by health care providers (monthly statistical report "Hospital beds and hospitalization")

Reference period: 31st December

Coverage: All hospitals HP.1 (public and private sector) are included.

Military hospital beds are excluded.

From the hospital beds are also excluded cots for neonates; day beds; provisional and temporary beds, beds in storerooms.

Beds in welfare institutions are excluded.

#### Long-term care beds (excl. psychiatric beds):

Source of data: Since 1.01.2008 National Institute for Health Development, Department of Health Statistics; Data from routinely collected health care statistics submitted by health care providers (monthly statistical report "Hospital beds and hospitalization")

Reference period: 31st December

Coverage: All hospitals HP.1 (public and private sector) are included.

Military hospital beds are excluded.

From the hospital beds are also excluded cots for neonates; day beds; provisional and temporary beds, beds in storerooms.

Beds in welfare institutions are excluded.

A large-scale legislative reforms took place in the early 1990s. The Health Insurance Act of 1991 and the Health Services Organization Act of 1994 provided the legal basis for reforms. In 1991 the provider licensing system was enhanced, which was an important precondition for decreasing hospital network capacity to enable more efficient use of resources and to ensure quality. In 1994, after a detailed review of all providers, substandard providers were closed and hospital bed structure changed as well.

Break in the series: 1994.

#### Other hospital beds:

Source of data: Since 1.01.2008 National Institute for Health Development, Department of Health Statistics; Data from routinely collected health care statistics submitted by health care providers (monthly statistical report "Hospital beds and hospitalization") and data from Ministry of Financial Affairs.

Reference period: 31st December

Coverage: All hospitals HP.1 (public sector, i.e. more than 50% is owned by the government or local municipalities) are included.

From the hospital beds are also excluded cots for neonates; day beds; provisional and temporary beds, beds in storerooms.

Beds in welfare institutions are excluded.

Statistics on hospital beds by sector for 1999-2001 are missing. Due to the reform that took place in health care sector and had an influence to the definition of ownership data for 1999-2001 is currently not valid.

*Notes updated: 2010*

## **Ireland**

### Total hospital beds:

Source of data:

Curative care and other beds sources:

- for 2006 onwards, source is Health Service Executive;
- for years prior to 2006, source is Department of Health and Children, Integrated Management Returns.

Psychiatric care beds source is Mental Health Commission Annual Report.

Long-term care beds source is Department of Health and Children.

Coverage:

- Figures refer to beds, excluding day beds, in publicly funded acute hospitals, district/community hospitals, geriatric hospitals and psychiatric hospitals. Beds in private short-stay hospitals are not included.
- Figures refer to in-patient beds in publicly funded acute and long-stay hospitals. Beds in private hospitals are not included.
- Beds in public and private psychiatric hospitals are also included.

### Curative (acute) care beds:

Source of data:

- for 2006 onwards: Health Service Executive;
- for data up to and including 2005: Department of Health and Children.

Coverage:

- Data refers to average available beds in publicly funded acute hospitals only.
- Geriatric beds in public acute hospitals are included.
- Psychiatric beds in acute hospitals are excluded.
- Beds in private hospitals are not included.

Break in time series:

- Up to and including 1996, figures refer to beds, excluding day beds, in publicly funded acute hospitals where the average length of stay is 18 days or less. From 1997, figures refer to beds in Health Service Executive network hospitals only.
- Data for 1980-1986 included beds in short-stay district hospitals.

### Psychiatric care beds:

Source of data:

- for 2004 onwards: Mental Health Commission Annual Reports.
- for data up to and including 2003: Department of Health and Children.

Coverage:

- Refers to psychiatric beds in acute hospitals and in all psychiatric hospitals.

Break in time series:

- Up to and including 1986 figures refer to beds in public psychiatric hospitals and beds in psychiatric units in acute hospitals. From 1987 beds in private psychiatric hospitals are also included.

### Long-term care beds (excl. psychiatric beds):

Source of data: Department of Health and Children, Annual Survey of Long-Stay Units.

Coverage:

- Refers to beds in public long-stay geriatric hospitals and district/community hospitals.
- Data comes from the Annual Survey of Long-Stay Units. Approximately 80% of long-stay units respond to this survey each year. For facilities where no data was received, bed numbers were rolled forward from the previous year.

### Other hospital beds:

Source of data:

- for 2006 onwards: Health Service Executive;

- for data up to and including 2005: Department of Health and Children.

Coverage:

- Refers to beds in non-acute hospitals not included elsewhere.

Break in time series:

- From 1987 to 1996, figures refer to beds in other hospitals where the length of stay is greater than 18 days. From 1997, figures refer to beds in hospitals not included in either HSE network hospitals or long-stay hospitals.

*Notes updated: 2010*

## **Greece**

Total hospital beds:

Source of data: Hellenic Statistical Authority (EL.STAT.), Hospital Census

Curative (acute) care beds:

Source of data: Hellenic Statistical Authority (EL.STAT.), Hospital Census

Psychiatric care beds:

Source of data: Hellenic Statistical Authority (EL.STAT.), Hospital Census

Long-term care beds (excl. psychiatric beds):

Data not available

Other hospital beds:

Data not available

*Notes updated: 2010*

## **Spain**

Total hospital beds

Source of data:

- Before 1996: National Statistics Institute and Ministry of Health and Consumer Affairs; Statistics on Health Establishments Providing Inpatient Care. <http://www.ine.es/>

- Since 1996: Ministry of Health and Social Policy data; Statistics on Health Establishments Providing In-patient Care.

<http://www.msc.es/estadEstudios/estadisticas/estHospiInternado/inforAnual/homeESCRI.htm>

Coverage: All public and private hospitals in Spain are included.

Curative (acute) care beds in hospitals

Source of data:

- Before 1996: National Statistics Institute and Ministry of Health and Consumer Affairs; Statistics on Health Establishments Providing Inpatient Care. <http://www.ine.es/>

- Since 1996: Ministry of Health and Social Policy data; Statistics on Health Establishments Providing In-patient Care.

<http://www.msc.es/estadEstudios/estadisticas/estHospiInternado/inforAnual/homeESCRI.htm>

Coverage: All public and private hospitals in Spain are included.

Psychiatric care beds in hospitals

Source of data:

- Before 1996: National Statistics Institute and Ministry of Health and Consumer Affairs; Statistics on Health Establishments Providing Inpatient Care. <http://www.ine.es/>

- Since 1996: Ministry of Health and Social Policy data; Statistics on Health Establishments Providing In-patient Care.

<http://www.msc.es/estadEstudios/estadisticas/estHospiInternado/inforAnual/homeESCRI.htm>

Coverage: All public and private hospitals in Spain are included.

Long-term care beds in hospitals (excluding psychiatric beds)

Source of data:

- Before 1996: National Statistics Institute and Ministry of Health and Consumer Affairs; Statistics on Health Establishments Providing Inpatient Care. <http://www.ine.es/>  
- Since 1996: Ministry of Health and Social Policy data; Statistics on Health Establishments Providing In-patient Care.  
<http://www.msc.es/estadEstudios/estadisticas/estHospiInternado/inforAnual/homeESCRI.htm>  
Coverage: All public and private hospitals in Spain are included.  
Other hospital beds  
Source of data: Ministry of Health and Social Policy data; Statistics on Health Establishments Providing In-patient Care.  
<http://www.msc.es/estadEstudios/estadisticas/estHospiInternado/inforAnual/homeESCRI.htm>  
Coverage: All public and private hospitals in Spain are included.  
*Notes updated: 2010*

## **France**

### Total hospital beds:

Source of data: Ministère de la Santé et des Sports - Direction de la Recherche, des Etudes, de l'Evaluation et des Statistiques (DREES). Data are from the "Statistique Annuelle des Etablissements de santé (SAE)".

Reference period: 31st December.

Coverage: Data refer to metropolitan France and D.O.M. (overseas départements).

### Curative (acute) care beds in hospitals:

Source of data: Ministère de la Santé et des Sports - Direction de la Recherche, des Etudes, de l'Evaluation et des Statistiques (DREES). Data are from the "Statistique Annuelle des Etablissements de santé (SAE)".

Reference period: 31st December.

Coverage: Data refer to metropolitan France and D.O.M. (overseas départements).

### Psychiatric care beds in hospitals:

Source of data: Ministère de la Santé et des Sports - Direction de la Recherche, des Etudes, de l'Evaluation et des Statistiques (DREES). Data are from the "Statistique Annuelle des Etablissements de santé (SAE)".

Reference period: 31st December.

Coverage: Data refer to metropolitan France and D.O.M. (overseas départements).

### Long-term care beds in hospitals (excluding psychiatric beds):

Source of data: Ministère de la Santé et des Sports - Direction de la Recherche, des Etudes, de l'Evaluation et des Statistiques (DREES). Data are from the "Statistique Annuelle des Etablissements de santé (SAE)".

Reference period: 31st December.

Coverage: Data refer to metropolitan France and D.O.M. (overseas départements).

### Other hospital beds:

Source of data: Ministère de la Santé et des Sports - Direction de la Recherche, des Etudes, de l'Evaluation et des Statistiques (DREES). Data are from the "Statistique Annuelle des Etablissements de santé (SAE)".

Reference period: 31st December.

Coverage: Data refer to metropolitan France and D.O.M. (overseas départements).

*Notes updated: 2010*

## **Italy**

### Total hospital beds:

Source of data: Ministry of Health – D.G. of Health Information System – Office of Statistics.  
<http://www.salute.gov.it/servizio/datisis.jsp>.

Coverage:

- All public, not for-profit and private hospitals are registered.
- Since 2000, data refers to all hospitals, public and private, including private hospitals not accredited by National Health Service and except military hospitals.
- Before 2000, data refers to all hospitals, public and private, excluding private hospitals not accredited by National Health Service and except military hospitals.

Curative (acute) care beds in hospitals:

Source of data: Ministry of Health – D.G. of Health Information System – Office of Statistics.  
<http://www.salute.gov.it/servizio/datisis.jsp>.

Coverage:

- All public, not for-profit and private hospitals are registered.
- Until 1999 data includes all in-patient beds except psychiatric care beds and long-term care beds. From 2000 data includes all in-patient beds except rehabilitative care beds, psychiatric care beds and long-term care beds

Psychiatric care beds in hospitals:

Source of data: Ministry of Health – D.G. of Health Information System – Office of Statistics.  
<http://www.salute.gov.it/servizio/datisis.jsp>.

Coverage:

- All public, not for-profit and private hospitals are registered.
- Beds in psychiatric departments of general hospitals (HP.1.1).
- Psychiatric care beds include beds for infant patients with mental health diseases.

Long-term care beds in hospitals (excluding psychiatric beds):

Source of data: Ministry of Health – D.G. of Health Information System – Office of Statistics.  
<http://www.salute.gov.it/servizio/datisis.jsp>.

Coverage:

- All public, not for-profit and private hospitals are registered.
- Beds in long-term care departments of general hospitals (HP.1.1).

Other hospital beds:

Source of data: Ministry of Health – D.G. of Health Information System – Office of Statistics.  
<http://www.salute.gov.it/servizio/datisis.jsp>.

Coverage:

- All public, not for-profit and private hospitals are registered.
- All other beds in hospitals (HP.1) not elsewhere classified.
- Inclusion: beds for rehabilitation (HC.2).

*Notes updated: 2010*

## **Cyprus**

Total hospital beds:

Source of data: Statistical Service of Cyprus, Source: Public sector administrative sources and Private Clinics Inspectors for the Private Sector.

Validity of the source: For the years 1985, 1987, 1995 and 2000 figures were obtained from the Census of Doctors, Dentists and Clinics.

Reference period: 31<sup>st</sup> December of the reference year

Coverage: Data refer to General Hospitals, Rural Hospitals and one Special Hospital (psychiatric) of the public sector as well as the total number of beds of the private sector.

Curative (acute) care beds:

Source of data: Statistical Service of Cyprus, Source: Public sector administrative sources and Private Clinics Inspectors for the Private Sector.

Validity of the source: For the years 1985, 1987, 1995 and 2000 figures were obtained from the Census of Doctors, Dentists and Clinics.

Reference period: 31<sup>st</sup> December of the reference year

Coverage: Data refer to General and Rural Hospitals of the public sector only.

Psychiatric care beds:

Source of data: Statistical Service of Cyprus, Source: Public sector administrative sources

Validity of the source: For the years 1985, 1987, 1995 and 2000 figures were obtained from the Census of Doctors, Dentists and Clinics.

Reference period: 31<sup>st</sup> December of the reference year

Coverage: Psychiatric beds refer to public sector only: General hospitals and Athalassa special (long-term care) hospital.

Long-term care beds (excl. psychiatric beds):

This category does not exist in Cyprus.

Other hospital beds:

This category does not exist in Cyprus.

*Notes updated: 2010*

## **Latvia**

Total hospital beds:

Source of data: The Centre of Health Economics Database of hospital beds' utilization;

Reference period:

- Up to 1999: end of the year

- From 2000: mid-year

Curative (acute) care beds:

Source of data: The Centre of Health Economics Database of hospital beds' utilization;

Reference period:

- Up to 1999: end of the year

- From 2000: mid-year

Psychiatric care beds:

Source of data: The Centre of Health Economics Database of hospital beds' utilization;

Reference period:

- Up to 1999: end of the year

- From 2000: mid-year

Long-term care beds (excl. psychiatric beds):

Source of data: The Centre of Health Economics Database of hospital beds' utilization;

Reference period:

- Up to 1999: end of the year

- From 2000: mid-year

Other hospital beds:

Source of data: The Centre of Health Economics Database of hospital beds' utilization;

Reference period:

- Up to 1999: end of the year

- From 2000: mid-year

*Notes updated: 2010*

## **Lithuania**

Total hospital beds:

Source of data: Lithuanian Health Information Centre, data of annual summary reports

Reference period: 31<sup>st</sup> December

Coverage: The number of hospital beds excludes nursing beds

Curative (acute) care beds:

Source of data: Lithuanian Health Information Centre, data of annual summary reports

Reference period: 31<sup>st</sup> December

Coverage: The number of hospital beds excluding tuberculosis, rehabilitation, psychiatric and substance abuse, nursing beds.

Psychiatric care beds:

Source of data: Lithuanian Health Information Centre, data of annual summary reports

Reference period: 31<sup>st</sup> December

Long-term care beds (excl. psychiatric beds):

Source of data: Lithuanian Health Information Centre, data of annual summary reports

Reference period: 31<sup>st</sup> December

Coverage: The number of long term nursing care beds includes tuberculosis beds.

Other hospital beds:

Source of data: Lithuanian Health Information Centre, data of annual summary reports

Reference period: 31<sup>st</sup> December

Coverage: The number of other beds includes rehabilitation beds in general and rehabilitation hospitals.

*Notes updated: 2010*

## **Luxembourg**

Total hospital beds:

Source of data: National Health Insurance (CNS) - data included in the budget.

Coverage: includes the total number of beds in general hospitals, psychiatric hospitals and for drug addicts in specialised hospitals (HP. 1.1 HP. 1.2 et HP. 1.3 of the ICHA-HP terminology) is only available from 2004.

Estimation method: It is currently difficult to distinguish the in-patient beds from beds for same-day care, models for differentiating them are currently being studied. Their application should clarify the situation.

Curative (acute) care beds:

Source of data: National Health Insurance (CNS) - data included in the budget.

Coverage:

- Functional rehabilitation and readjustment beds are no longer included in this heading.
- It is not currently possible to remove palliative care beds, they are therefore included.
- It includes beds for curative care (HC.1) in general hospitals and specialised institutions (HP. 1.1 and HP. 1.3 from ICHA-HP terminology) is only available from 2004.

Psychiatric care beds:

Source of data: National Health Insurance (CNS) - data included in the budget.

Coverage:

- It includes psychiatric beds in general hospitals (HP.1.1), psychiatric hospitals and beds for drug addicts (HP.1.2) is only available from 2004. In other specialised establishments, funded psychiatric beds do not exist.
- It is important to note that the beds included in the selection are in specialised psychiatric institutions which mainly provide psychiatric rehabilitative care on a medium and long-term basis and have only a small number of beds for acute psychiatry (around 30 acute beds compared to 288, 227, 207 and 2007 medium and long-stay beds from 2004 to 2007).

Long-term care beds (excl. psychiatric beds):

Source of data: Direction de la Santé, Division de la Médecine Curative; Union des Caisses de Maladie - UCM - data included in the budget.

Estimation method:

- Following the introduction of the 'dependence insurance' (assurance dépendance) in 1998, long-term care beds do not depend on hospitals anymore.
- For the moment, it is not possible to identify palliative care beds.

### Other hospital beds:

Source of data: National Health Insurance (CNS) - data included in the budget.

Coverage:

- Included are rehabilitation and functional readaptation beds, geriatric rehabilitation and convalescence beds.
- The series concerning other beds is only possible from 2004. The data presented refers to functional rehabilitation and readjustment and to geriatric rehabilitation beds in general hospitals (HP.1.1) and in specialised establishments which provide rehabilitative care (HP.1.3).

*Notes updated: 2010*

## **Hungary**

### Total hospital beds:

Source of data: From 1994 Hungarian National Health Insurance Fund (OEP) Department of Financing Informatics (GYOGYINFOK), Hospital bed and patient turnover account.

<http://www.gyogyinfok.hu/>

Coverage: On December 31st, the number of beds accredited till 1993. On December 31st the number of hospital beds run by hospitals contracted with OEP since 1994

Break in the series:

In 2007, the number of acute care beds of hospitals contracted with OEP decreased significantly and there was an increase in the number of chronic hospital beds.

### Curative (acute) care beds:

Source of data: From 1994 Hungarian National Health Insurance Fund (OEP) Department of Financing Informatics (GYOGYINFOK), Hospital bed and patient turnover account.

<http://www.gyogyinfok.hu/>

Coverage: On December 31st the number of hospital beds run by hospitals contracted with OEP since 1994

Break in the series:

- In 1997, there was a 8% reduction of acute beds.
- In 2007, the number of acute care beds of hospitals contracted with OEP decreased significantly.

### Psychiatric care beds:

Source of data: From 1994 Hungarian National Health Insurance Fund (OEP) Department of Financing Informatics (GYOGYINFOK), Hospital bed and patient turnover account.

<http://www.gyogyinfok.hu/>

Break in the series:

In 2007, the number of acute psychiatric beds contracted with OEP decreased significantly.

### Long-term care beds (excl. psychiatric beds):

Source of data: From 1994 Hungarian National Health Insurance Fund (OEP) Department of Financing Informatics (GYOGYINFOK), Hospital bed and patient turnover account.

<http://www.gyogyinfok.hu/>

Coverage: Number of follow-up, after care, chronic pulmonary care and long-term care beds of hospitals being in contract with OEP since 1994, on 31 December.

Break in the series:

- In 1997, there was an 11% reduction of long term beds.
- In 2007, the number of chronic inpatient beds of hospitals contracted with OEP increased significantly.

### Other hospital beds:

Source of data: Hungarian National Health Insurance Fund (OEP) Department of Financing Informatics (GYOGYINFOK), Hospital bed and patient turnover account.

<http://www.gyogyinfok.hu/>

Coverage: Number of rehabilitation and chronic psychiatric beds of hospitals being in contract with OEP since 1994, on 31 December.

Break in the series:

The number of chronic hospital beds of hospitals being in contract with OEP increased significantly in 2007.

*Notes updated: 2010*

## **Malta**

### Total hospital beds:

Source of data: Joint collation by Department of Health Information & Research, Health Care Services Standards, Health Division within Ministry of Health, the Elderly and Community Care and Individual Institutions.

Reference period: end of the year

Coverage:

Strict criteria according to definitions were used in collation of available hospital beds from 2005 onwards. This will explain the shift in numbers from other years. Other hospital beds include rehabilitation beds and respite beds.

Changes in numbers of available beds for 2007 are mainly due to restructuring and changes in numbers of available beds with the "migration" of the main State general Hospital in Malta (St. Luke's Hospital) to the new "Mater Dei Hospital". The old State main General Hospital in Malta was closed down. However, a number of beds (155 in all) were retained as long term beds and as rehabilitation beds in Karen Grech Hospital within the grounds of the old main general hospital.

The changes in numbers of available beds for 2008 reflect an ongoing process of restructuring within the Health Division of the Ministry for Social Policy and relicensing of healthcare establishments.

There is a downward change in the total number of available beds for end 2009 due to relicensing of the main state Geriatric Hospital as a residential and nursing care facility (HP.2) in 2009

### Curative (acute) care beds:

Source of data: Joint collation by Department of Health Information & Research, Health Care Services Standards, Health Division within Ministry for Health, the Elderly and Community Care, and individual institutions.

Reference period: end of the year

Coverage:

Strict criteria according to definitions were used in collation of available hospital beds from 2005 onwards. This will explain the shift in numbers from other years. Changes in numbers of available beds for 2007 are mainly due to restructuring and changes in numbers of available beds with the "migration" of the main State general Hospital in Malta (St. Luke's Hospital) to the new "Mater Dei Hospital". The old State main General Hospital in Malta was closed down. However, a number of beds (155 in all) were retained as long term beds and as rehabilitation beds in Karen Grech Hospital within the grounds of the old main general hospital.

The changes in numbers of available beds for 2008 reflect an ongoing process of restructuring within the Health Division of the Ministry for Social Policy and relicensing of healthcare establishments.

### Psychiatric care beds:

Source of data: Joint collation by Department of Health Information & Research, Health Care Services Standards, Health Division within Ministry of Health, the Elderly and Community Care and Individual Institutions.

Reference period: end of the year

Coverage:

Strict criteria according to definitions were used in collation of available hospital beds from 2005 onwards. This will explain the shift in numbers from other years. Changes in numbers of available beds for 2007 are mainly due to restructuring and changes in numbers of available beds with the "migration" of the main State general Hospital in Malta (St. Luke's Hospital) to the new "Mater Dei Hospital". The old State main General Hospital in Malta was closed down. However, a number of beds (155 in all) were retained as long term beds and as rehabilitation beds in Karen Grech Hospital within the grounds of the old main general hospital.

The changes in numbers of available beds for 2008 reflect an ongoing process of restructuring within the Health Division of the Ministry for Social Policy and relicensing of healthcare establishments.

Long-term care beds (excl. psychiatric beds):

Source of data: Joint collation by Department of Health Information & Research, Health Care Services Standards, Health Division within Ministry for Health, the Elderly and Community Care.

Reference period: end of the year

Coverage:

Strict criteria according to definitions were used in collation of available hospital beds from 2005 onwards. This will explain the shift in numbers from other years. Changes in numbers of available beds for 2007 are mainly due to restructuring and changes in numbers of available beds with the "migration" of the main State general Hospital in Malta (St. Luke's Hospital) to the new "Mater Dei Hospital". The old State main General Hospital in Malta was closed down. However, a number of beds (155 in all) were retained as long term beds and as rehabilitation beds in Karen Grech Hospital within the grounds of the old main general hospital.

The changes in numbers of available beds for 2008 reflect an ongoing process of restructuring within the Health Division of the Ministry for Social Policy and relicensing of healthcare establishments.

The main state geriatric hospital was relicensed as a residential and nursing care institution in 2009 and this accounts for the drastic reduction of longterm care beds in hospitals at end 2009.

Other hospital beds:

Source of data: Joint collation by Department of Health Information & Research, Health Care Services Standards, Health Division within Ministry for Health, the elderly and Community Care, and Individual Institutions.

Reference period: end of the year

Coverage:

Strict criteria according to definitions were used in collation of available hospital beds from 2005 onwards. This will explain the shift in numbers from other years. Other hospital beds include rehabilitation beds and respite beds.

Changes in numbers of available beds for 2007 are mainly due to restructuring and changes in numbers of available beds with the "migration" of the main State general Hospital in Malta (St. Luke's Hospital) to the new "Mater Dei Hospital". The old State main General Hospital in Malta was closed down. However, a number of beds (155 in all) were retained as long term

beds and as rehabilitation beds in Karen Grech Hospital within the grounds of the old main general hospital.

The changes in numbers of available beds for 2008 reflect an ongoing process of restructuring within the Health Division of the Ministry for Social Policy and relicensing of healthcare establishments.

*Notes updated: 2010*

## **Netherlands**

### Total hospital beds:

Source of data:

- 1990-2000: Annual survey Statistics Netherlands
- 2001- : Prismant, annual survey Statistics Netherlands, NZA (Dutch Health Authority)

Reference period:

- 1990-2000: annual average
- 2001-: 1 January

Coverage: Beds in general, university and specialized hospitals, as well as in mental hospitals; including beds for same-day care. Not included are beds in a few hospices for terminal care and in nursing homes.

- until 2002: excluding cots for healthy infants
- from 2003: including cots for healthy infants

### Curative (acute) care beds:

Source of data:

- 1990-2000: Annual survey Statistics Netherlands
- 2001- : Prismant

Reference period:

- 1990-2000: annual average
- 2001-: 1 January

Coverage: refers to general hospitals and university hospitals

- until 2002: excluding cots for healthy infants and beds in psychiatric wards of university hospitals and of general hospitals
- from 2003: excluding beds in psychiatric wards of general hospitals; including cots for healthy infants and beds in psychiatric wards of university hospitals

### Psychiatric care beds:

Source of data:

- 1990-2000: Annual survey Statistics Netherlands
- 2001-2002: psychiatric care beds in general hospitals and university hospitals: Prismant; psychiatric care beds in psychiatric hospitals: annual survey Statistics Netherlands
- 2003- : NZA (Dutch Health Authority)

Reference period:

- 1990-2000: annual average
- 2001-: 1 January

Coverage:

- until 2002: beds in psychiatric hospitals + beds in psychiatric wards of general hospitals + beds in psychiatric wards in university hospitals
- from 2003: beds in psychiatric hospitals + beds in psychiatric wards of general hospitals; and exclusive of beds in psychiatric hospitals of the Ministry of Justice  
beds in sheltered dwellings (so called RIBW- en) are excluded

### Long-term care beds (excl. psychiatric beds):

There are no beds allocated to LTC in hospitals in the Netherlands.

### Other hospital beds:

Source of data:

- 1990-2000: Annual survey Statistics Netherlands

- 2001- : Prismant

Reference period:

- 1990-2000: annual average

- 2001-: 1 January

Estimation method: data are estimated as the difference between Total hospital beds and the sum of Curative care beds and Psychiatric care beds.

*Notes updated: 2010*

## **Austria**

### Total hospital beds

Source of data: Austrian Federal Ministry of Health, Hospital Statistics (annual average).

Reference period: 31 December.

Deviation from the definition: Beds for same-day care are included.

### Curative (acute) care beds in hospitals

Source of data: Austrian Federal Ministry of Health, Hospital Statistics (annual average).

Reference period: 31 December.

Deviation from the definition: Beds in acute (short-term) hospitals (HP 1.1 und 1.3), excluding beds for palliative care and psychiatric care (however, including some psychiatric care beds and beds in mixed units for neurologic AND psychiatric care); excluding some non-psychiatric care beds in HP 1.2; beds for same-day care are included

### Psychiatric care beds in hospitals

Source of data: Austrian Federal Ministry of Health, Hospital Statistics (annual average).

Reference period: 31 December.

Deviation from the definition: Beds in HP 1.2 (also including some non-psychiatric care beds in these hospitals) and beds for psychiatric care in HP 1.1 and HP 1.3 (however, excluding some psychiatric care beds in mixed units for neurologic AND psychiatric care); beds for same-day care are included.

### Long-term care beds in hospitals (excluding psychiatric beds)

Source of data: Austrian Federal Ministry of Health, Hospital Statistics (annual average).

Reference period: 31 December.

### Other hospital beds

Source of data: Austrian Federal Ministry of Health, Hospital Statistics (annual average).

Reference period: 31 December.

*Notes updated: 2010*

## **Poland**

### Total hospital beds

Source of data: Ministry of Health, Ministry of National Defence, Ministry of the Interior and Administration and the CSO.

Coverage: From 2003, the total number of hospital beds comprises beds in all public and private hospitals, (i.e. general, psychiatric, sanatorium hospitals and specialised hospitals). Beds in palliative wards, rehabilitation sanatoria and sanatoria are also included. Beds in long-term nursing care facilities (nursing homes) are excluded.

Break: In 2008 the Ministry of Health changed the methodology of counting beds in general hospitals. Beds and incubators for newborns (neonatology wards) were included in total number of beds of general hospitals.

### Curative (acute) care beds

Source of data: Central Statistical Office, Statistical Yearbook.

Coverage: From 2003 onwards, acute care beds comprise beds in general and specialised hospitals, including data on hospitals of the Ministry of National Defence and the Ministry of the Interior and Administration, which were not calculated before. Palliative and rehabilitation wards are excluded in year 2008.

Breaks:

- In time period 2003-2007, palliative and rehabilitation beds are included.
- In 2008 the Ministry of Health changed the methodology of counting beds in general hospitals. Beds and incubators for newborns (neonatology wards) were included in curative beds of general hospitals. Palliative and rehabilitation beds are excluded.

Psychiatric care beds

Source of data: Central Statistical Office, Statistical Yearbook.

Coverage: From 2003 onwards, beds in psychiatric hospitals and psychiatric wards in general hospitals, including data from the Ministry of National Defence and the Ministry of the Interior and Administration.

Long-term care beds (excl. psychiatric beds)

Source of data: Central Statistical Office, Statistical Yearbook.

Coverage: From 2003 onwards, long-term care beds in hospitals comprise beds in sanatorium hospitals and long-term wards in hospitals, including data from the Ministry of National Defence and the Ministry of the Interior and Administration.

Other hospital beds

Source of data: Central Statistical Office, Statistical Yearbook.

Coverage: From 2003 onwards, other beds comprise beds for rehabilitation (HC.2) in sanatoria and rehabilitation sanatoria including, data from the Ministry of the Interior and Administration.

Break: In 2008 rehabilitation wards of general hospitals are included, which was not the case in previous years.

*Notes updated: 2010*

## **Portugal**

Total hospital beds:

Source of data: Statistics Portugal – Hospital Survey.

Reference period: average between the quarters.

Coverage:

- The Hospital Survey began in 1985. This survey covers the whole range of hospitals acting in Portugal: hospitals managed by the National Health Service (public hospitals, with universal access), non-public state hospitals (military and prison) and private hospitals.
  - From 1985 to 1998: practised allotment (beds of the hospital general in-patient) more intensive care beds (for this period, the intensive care beds were not considered as included in the practised allotment);
  - After 1999, inclusive: practised allotment (including beds of infirmaries, beds of particular rooms, intensive care beds, as well as neonatal special/intensive care beds, intermediate care beds, blasted unit beds, and beds of other hospital units).
  - In both series (1985-1998 and 1999-) there are some hospital beds not included because they never were included in the practised allotment (other beds, like beds of urgency services, beds of operated retrieval, beds of day hospital, beds for newborn babies, beds for dialysis ...).
- Beds of particular rooms were not included in the practised allotment, neither in total hospital beds, from 1985 to 1998.

Curative (acute) care beds in hospitals:

Source of data: Statistics Portugal – Hospital Survey.

Reference period: average between the quarters.

Coverage:

- The Hospital Survey began in 1985. This survey covers the whole range of hospitals acting in Portugal: hospitals managed by the National Health Service (public hospitals, with universal access), non-public state hospitals (military and prison) and private hospitals.
- Data include total hospital beds, less the beds from the following hospitals: psychiatrics and substance abuse hospitals, and alcoholics' rehabilitation.

Psychiatric care beds in hospitals:

Source of data: Statistics Portugal – Hospital Survey.

Reference period: average between the quarters.

Coverage:

- The Hospital Survey began in 1985. This survey covers the whole range of hospitals acting in Portugal: hospitals managed by the National Health Service (public hospitals, with universal access), non-public state hospitals (military and prison) and private hospitals.
- Data include beds from psychiatric and substance abuse hospitals.

Long-term care beds in hospitals (excluding psychiatric beds):

Data not available

Other hospital beds:

Source of data: Statistics Portugal – Hospital Survey.

Reference period: average between the quarters.

Coverage:

- The Hospital Survey began in 1985. This survey covers the whole range of hospitals acting in Portugal: hospitals managed by the National Health Service (public hospitals, with universal access), non-public state hospitals (military and prison) and private hospitals.
- Data include beds from alcoholics' rehabilitation hospitals.

*Notes updated: 2010*

## **Romania**

Total hospital beds:

Source of data: National Institute of Statistics and Ministry of Public Health

Reference period: data as of 31st December

Coverage:

From 1970 to 1998, data refer only to the public sector.

The major differences are due to multiples changes in the sanitary network from Romania and to try to efficient sanitary activity.

Break in the series: 1999.

Curative (acute) care beds:

Source of data: National Institute of Statistics and Ministry of Public Health

Reference period: data as of 31st December

Coverage:

From 1970 to 1998, data refer only to the public sector, excluding beds from sanatoria and preventoria.

The major differences are due to multiples changes in the sanitary network from Romania and to try to efficient sanitary activity.

Break in the series: 1999.

Psychiatric care beds:

Source of data: National Institute of Statistics and Ministry of Public Health

Reference period: data as of 31st December

Coverage:

From 1970 to 1998, data refer only to the public sector.

The major differences are due to multiples changes in the sanitary network from Romania and to try to efficient sanitary activity.

Break in the series: 1999.

Long-term care beds (excl. psychiatric beds):

Reference period: data as of 31st December

Coverage:

From 1970 to 1998, data refer only to the public sector.

The major differences are due to multiples changes in the sanitary network from Romania and to try to efficient sanitary activity.

Break in the series: 1999.

Other hospital beds:

This category does not exist.

*Notes updated: 2010*

## **Slovenia**

Total hospital beds:

Source of data: National Hospital Health Care Statistics Database

Curative (acute) care beds:

Source of data: National Hospital Health Care Statistics Database

Psychiatric care beds:

Source of data: National Hospital Health Care Statistics Database

Long-term care beds (excl. psychiatric beds):

Source of data: National Hospital Health Care Statistics Database

Other hospital beds:

Source of data: National Hospital Health Care Statistics Database

*Notes updated: 2010*

## **Slovakia**

Total hospital beds:

Source of data: National Health Information Center, regular statistical findings within the State Statistical Program.

Annual report (MZ SR) 1-01 on network of health care providers in SR.

Reference period: 31st December.

Coverage: beds in all hospital facilities excluding independent hospice, new-born beds (not new-born departments!) and dialysis points.

Curative (acute) care beds:

Source of data: National Health Information Center, regular statistical findings within the State Statistical Program.

Annual report (MZ SR) 1-01 on network of health care providers in SR.

Reference period: 31st December.

Coverage: Acute care beds = (number of beds in hospitals) minus (beds in psychiatric hospitals, departments for long-term treatment, psychiatric and gerontopsychiatry departments of hospitals, post-care beds and beds in institutes of complex post-care and rehabilitation and long-term nursing care beds ,beds in hospital departments for drug addictions treatment and centers for drug addictions treatment )

Break in time series: 2005 - change of types of facilities resulting from legal changes in accordance with Act No 578/2004 on health care providers.

Psychiatric care beds:

Source of data: National Health Information Center, regular statistical findings within the State Statistical Program.

Annual report (MZ SR) 1-01 on network of health care providers in SR  
Reference period: 31st December.

Coverage:

\* Psychiatric care beds = (number of beds in psychiatric hospitals + beds in psychiatric long term nursing care beds + beds in psychiatric and gerontopsychiatry departments of hospitals + beds in hospital departments for drug addictions treatment and centers for drug addictions treatment).

Long-term care beds (excl. psychiatric beds):

Source of data: National Health Information Center, regular statistical findings within the State Statistical Program.

Annual report (MZ SR) 1-01 on network of health care providers in SR.

Reference period: 31st December.

Coverage:

Long-term care beds = number of beds in special health institutes + beds in hospital departments for long-term treatment, post-care beds and beds in institutes of complex post-care and rehabilitation and long term nursing care beds, including palliative care.

Break in time series: 2005 - change of types of facilities resulting from legal changes in accordance with Act No 578/2004 on health care providers.

Other hospital beds:

Source of data: National Health Information Center, regular statistical findings within the State Statistical Program.

Annual report (MZ SR) 1-01 on network of health care providers in SR

Reference period: 31st December.

Coverage:

Other hospital beds = number of beds in specialized units: rehabilitative care, balneology, psychiatrics.

*Notes updated: 2010*

## **Finland**

Total hospital beds:

Source of data: National Institute for Health and Welfare (THL), Care Register for

Institutional Health Care:

Coverage: Calculated beddays/365 or 366 since 1994.

Curative (acute) care beds:

Source of data: National Institute for Health and Welfare (THL), Care Register for

Institutional Health Care:

Coverage: Calculated beddays/365 or 366 since 1994.

Psychiatric care beds:

Source of data: National Institute for Health and Welfare (THL), Care Register for

Institutional Health Care:

Coverage: Calculated beddays/365 or 366 since 1994.

Long-term care beds (excl. psychiatric beds):

Source of data: National Institute for Health and Welfare (THL), Care Register for Institutional Health Care

Coverage: Calculated beddays/365 or 366 since 1994.

Other hospital beds:

Source of data: National Institute for Health and Welfare (THL), Care Register for Institutional Health Care

Coverage: Calculated beddays/365 or 366 since 1994.

*Notes updated: 2010*

## Sweden

### Total hospital beds:

Data not available.

### Curative (acute) care beds:

Source of data:

Before 2001: Swedish Association of Local Authorities and Regions (earlier Federation of Swedish County Councils), Statistik om hälso- och sjukvård samt regional utveckling Verksamhet och ekonomi i landsting och regioner (several issues)

From 2001: Federation of Swedish County Councils and The National Board of Health and Welfare, Basårsstatistik (several issues)

Reference period:

Before 2001: 31<sup>st</sup> December

From 2001: annual average

Coverage: Curative care beds: until 2000 short-term care. As per 2001 specialized somatic care, geriatric care is excluded. Not comparable with earlier years.

### Psychiatric care beds:

Source of data:

Before 2001: Swedish Association of Local Authorities and Regions (earlier Federation of Swedish County Councils), Statistik om hälso- och sjukvård samt regional utveckling Verksamhet och ekonomi i landsting och regioner (several issues)

From 2001: Federation of Swedish County Councils and The National Board of Health and Welfare, Basårsstatistik (several issues)

Reference period:

Before 2001: 31<sup>st</sup> December

From 2001: annual average

Coverage:

Because of the change of term for in-patient care beds the decrease of total in-patient beds (incl. beds for psychiatric care and long-term care) can be estimated at about 500 average disposable beds between 2000 and 2001).

### Long-term care beds (excl. psychiatric beds):

Source of data:

Before 2001: Swedish Association of Local Authorities and Regions (earlier Federation of Swedish County Councils), Statistik om hälso- och sjukvård samt regional utveckling Verksamhet och ekonomi i landsting och regioner (several issues)

From 2001: Federation of Swedish County Councils and The National Board of Health and Welfare, Basårsstatistik (several issues)

Reference period:

Before 2001: 31<sup>st</sup> December

From 2001: annual average

Coverage:

Because of the change of term for in-patient care beds the decrease of total in-patient beds (incl. beds for psychiatric care and long-term care) can be estimated at about 500 average disposable beds between 2000 and 2001).

As per 2001 some beds not shown earlier are included. More care beds in private care are included in the later years, but some beds are still missing.

Long term care beds: Geriatrics.

### Other hospital beds:

Data not available.

*Notes updated: 2010*

## **United Kingdom**

### Total hospital beds:

Source of data:

- England - Department of Health, form KH03, England;
- Northern Ireland - Hospital Activity Statistics from Department of Health, Social Services and Public Safety, Korner Return Kh03a,
- Wales - Health Statistics Wales

<http://wales.gov.uk/topics/statistics/headlines/health2010/0114/?lang=en>

- Scotland - National Health Service.

Coverage:

- Does not include private sector.
- Data are for financial years (1st April to 31st March). E.g. data for financial year 1st April 2008 - 31st March 2009 are presented as 2008.

Deviation from the definition: Cots for healthy infants can not be excluded from Northern Ireland figures.

### Curative (acute) care beds in hospitals:

Source of data:

- England - Department of Health, form KH03, England;
- Northern Ireland - Hospital Activity Statistics from Department of Health, Social Services and Public Safety, Korner Return Kh03a,
- Wales - Health Statistics Wales

<http://wales.gov.uk/topics/statistics/headlines/health2010/0114/?lang=en>

- Scotland - National Health Service.

Coverage:

- Does not include private sector.
- Data are for financial years (1st April to 31st March). E.g. data for financial year 1st April 2008 - 31st March 2009 are presented as 2008.

Deviation from the definition:

- England and Northern Ireland: It is not possible to separate Long-Term care beds from Curative care beds. In Wales it is not possible to separate Curative Geriatric beds from Long-Term Geriatric beds. As such for consistency purposes, Curative care beds for the UK include Long Term care beds.

- England: Rehabilitation beds are included with Curative beds, as it is not possible to separate these.

### Psychiatric care beds in hospitals:

Source of data:

- England - Department of Health, form KH03, England;
- Northern Ireland - Hospital Activity Statistics from Department of Health, Social Services and Public Safety, Korner Return Kh03a,
- Wales - Health Statistics Wales

<http://wales.gov.uk/topics/statistics/headlines/health2010/0114/?lang=en>

- Scotland - National Health Service.

Coverage:

- Does not include private sector.
- Data are for financial years (1st April to 31st March). E.g. data for financial year 1st April 2008 - 31st March 2009 are presented as 2008.

### Long-term care beds in hospitals (excluding psychiatric beds):

Data not available. (In England and Northern Ireland it is not possible to separate Long-Term beds from Curative care beds. In Wales it is not possible to separate Curative Geriatric beds

from Long-Term Geriatric beds. As such for consistency purposes, Long-Term care beds for the UK are included with Curative care beds.)

Other hospital beds:

Source of data:

- England - Department of Health, form KH03, England;
- Northern Ireland - Hospital Activity Statistics from Department of Health, Social Services and Public Safety, Korner Return Kh03a,
- Wales - Health Statistics Wales  
<http://wales.gov.uk/topics/statistics/headlines/health2010/0114/?lang=en>
- Scotland - National Health Service.

Coverage:

- Does not include private sector.
- Data are for financial years (1st April to 31st March). E.g. data for financial year 1st April 2008 - 31st March 2009 are presented as 2008.

Deviation from the definition:

- England: Rehabilitation beds are included with Curative beds, as it is not possible to separate these.

*Notes updated: 2010*

## **Croatia**

Source: Croatian National Institute of Public Health.

*Notes updated: 2004*

## **Former Yugoslav Republic of Macedonia**

Source: Republic Institute for Health Protection-Skopje.

*Notes updated: 2008*

## **Turkey**

Total hospital beds:

Source of data:

From 2000 onwards: General Directorate of Curative Services, Ministry of Health.

Coverage:

- Total number of beds in MoH, University, Private Sector, Others (except for the Ministry of Defence hospital beds) are included.
- According to the bed descriptions revised in 2008, the number of beds after 2000 was revised accordingly and covers only occupied (active) beds.
- For pre-2000, the number of beds given covers the MoD beds and unoccupied beds.

Curative (acute) care beds in hospitals:

Source of data:

From 2000 onwards: General Directorate of Curative Services, Ministry of Health.

Coverage:

From 2000 onwards: Acute care beds are beds in all acute care hospitals in MoH, University, Private Sector, Others (except for the Ministry of Defence hospital beds).

Psychiatric care beds in hospitals:

Source of data:

From 2000 onwards: General Directorate of Curative Services, Ministry of Health.

Coverage:

- From 2000 onwards: Psychiatric care beds are beds in all psychiatric hospitals in MoH, University, Private Sector and Others (except for the Ministry of Defence hospital beds).
- Psychiatric care beds in General Hospital are not included.

### Long-term care beds in hospitals (excluding psychiatric beds):

There are no long-term care beds in Turkey that correspond to the description of long-term bed.

### Other hospital beds:

Source of data: General Directorate of Curative Services, Ministry of Health.

Coverage:

- From 2000 onwards: Number of other hospital beds includes total number of beds in physical treatment and rehabilitation hospitals in which MoH, University, Private Sector and Others (except for the Ministry of Defence hospital beds).

*Notes updated: 2010*

## **Iceland**

### Total hospital beds

Source of data:

- 1996 and on: Statistics Iceland.

- 1989-1995: The Ministry of Health and Social Security; Reports on the activities of hospitals 1989-1995.

Coverage: Beds in all hospitals.

Estimation method: Until 1988, the figures show registered beds but from 1989 beds are calculated from bed-days and 90% occupancy rate.

### Curative (acute) care beds

Source of data:

- 1996: Statistics Iceland.

- 1989-1995: The Ministry of Health and Social Security; Reports on the activities of hospitals 1989-1995.

Coverage: Included are beds in specialized hospitals, excluding psychiatry, rehabilitation, geriatrics and nursing wards. Included are also small, general hospitals, but only discharges for bed-days under 90 days.

Estimation method: Beds are calculated from bed-days and a 90% occupancy rate.

### Psychiatric care beds

Source of data: The Ministry of Health and Social Security, Directorate of Health.

Estimation method: Registered beds in psychiatric wards until 1988 but beds calculated from bed-days and 90% occupancy rate from 1989.

### Long-term care beds (excl. psychiatric beds)

Source of data:

- 1996 and on: Statistics Iceland.

- 1989-1995: The Ministry of Health and Social Security; Reports on the activities of hospitals 1989-1995.

Reference period:

- 1996 and on: data in December each year.

- Up to 1995: annual average.

Coverage:

- 2000 and on: Geriatric care beds excluded as of 2000 as they are not considered as nursing care beds. (Number of beds in geriatric wards for information: 2000: 142; 2001: 148; 2002: 112; 2003: 128; 2004: 148; 2005: 167; 2006: 161; 2007:157; 2008:167)

- 1999 and on: Palliative care inclusive.

- 1996 -1999: Refers to available nursing beds in hospitals as well as beds in geriatric wards in hospitals.

- 1989-1995: Beds in nursing care and geriatric care at hospitals (calculated from database on the activities of the hospitals).

Estimation method:

- 1989-1995: In the database on the activities of the hospitals, beds are not registered but they are calculated from bed-days and a 90% occupational rate.

Break in time series:

- 1996-1999: Beds in nursing care and geriatric care beds in hospitals based on data from the Ministry of Health and Social security on authorised beds and data collected by Statistics Iceland (revised February 2007). Break in series 1996 (change from calculated beds to counting of beds).

- 2000 and onwards: Beds in nursing wards/care in hospitals (palliative care included). Here, beds in geriatric wards are excluded as they are not considered as long-term care.

Break in series: 2000 due to the exclusions of beds nursing wards/care in hospitals.

Other hospital beds

Source of data: The Ministry of Health and Social Security; Reports on the activities of hospitals 1989-1995.

Reference period: annual average.

*Notes updated: 2010*

## **Norway**

Total hospital beds:

Source of data: Specialist Health Services, Statistics Norway. Data collected annually through questionnaires.

Curative (acute) care beds:

Source of data: Specialist Health Services, Statistics Norway. Data collected annually through questionnaires.

Psychiatric care beds:

Source of data: Specialist Health Services, Statistics Norway. Data collected annually through questionnaires.

Long-term care beds (excl. psychiatric beds):

Data not available.

Other hospital beds:

Source of data: Specialist Health Services, Statistics Norway. Data collected annually through questionnaires.

*Notes updated: 2010*

## **Switzerland**

Total hospital beds:

Source of data: FSO Federal Statistical Office, Neuchâtel; Hospitals Statistics

Deviation from the definition: Annual average number of beds in use

Curative (acute) care beds:

Source of data: FSO Federal Statistical Office, Neuchâtel; Hospitals Statistics

Deviation from the definition: Annual average number of beds in use

Psychiatric care beds:

Source of data: FSO Federal Statistical Office, Neuchâtel; Hospitals Statistics

Deviation from the definition: Annual average number of beds in use

Long-term care beds (excl. psychiatric beds):

Data not available.

Other hospital beds:

Source of data: FSO Federal Statistical Office, Neuchâtel; Hospitals Statistics

Deviation from the definition: Annual average number of beds in use.

*Notes updated: 2010*