

THE NETHERLANDS

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HEALTHCARE AND HOSPITAL EXPENDITURE

HEALTHCARE SYSTEM EXPENDITURE	2001	2006	Difference
1. Total health expenditure, PPP\$ per capita	2.555,00	3.611,00	+41,33%
2. Total inpatient expenditure, PPP\$ per capita	950,00	1.178,00*	+24,00%
3. Total inpatient expenditure as % of total health expenditure	37,20%	39,60%*	+2,40

Note. Indicators 2 and 3, last available data: year 2003.

What main factors have determined the rising of health expenditure in your country in the last 5/10 years?

- ▶ In the Netherlands it is a matter of: ageing of population, introduction of medical technologies, rising incomes, rising healthcare demand, rising appreciation of good health. All those factors determine the rise of expenditures.

What does explain the changes of the level of inpatient care expenditure in the last 5/10 years? Which types of hospital costs have been the driving forces?

- ▶ For one part, they are the same factors causing the increase in the inpatient expenditure that influence the rise of healthcare expenditures.
- ▶ Typical hospital costs rising are medications, medical devices and medical technologies.

What impact is the current crisis having and what impact is it likely to have in the future on healthcare level of expenditure?

- ▶ Current economic and financial crisis will have its impact on Dutch hospital care, but it is not yet clear to what extent.
- ▶ The Dutch government is facing growing deficits and is considering possible cutbacks in collective health care expenditures.
- ▶ Due to severe investments, hospital organisations are facing budget deficits. Some hospitals in the Netherlands are planning huge rebuilding or renovation works but the access to financial budgets and loans is getting more and more problematic.

HOSPITAL PROVISION

HOSPITAL PROVISION	2001	2006	Difference
4. Total number of hospital beds per 100.000 population	466,42	445,80	-4,42%
5. Acute care hospital beds per 100.000 population	307,38	304,14	-1,05%

Could you explain the trends affecting hospital care and, in particular, acute care, such as shift to primary/home care, increase in hospice care, improved treatment times, etc...?

- ▶ Hospital beds are generally expensive, in the Netherlands and everywhere. Therefore hospitals try to change /replace the patients into other types of institutions, with still an appropriate kind of care. That is more efficient and saves money.

ACUTE CARE HOSPITAL INDICATORS	2001	2006	Difference
6. Acute care admissions/discharges per 100 population	8,83%	10,47%	+1,64
7. Average length of stay for acute care hospitals (bed-days)	7,4	6,6	-0,8

Please, comment the figures about the rate of hospital admissions and the average length of stay for acute care hospitals. What do these figures highlight about hospital healthcare in your country?

- ▶ We see an ongoing diminishing of the length of stay in hospitals. Every year patients stay shorter in their hospital beds. This allows saving money and improve efficiency.

HEALTHCARE WORKFORCE

HEALTHCARE PROFESSIONALS	2001	2006	Difference
8. Physicians per 100.000 population	327,82	382,33	+16,63%
9. Nurses per 100.000 population	1.328,22	1.479,26	+11,37%
10. Rate of nurses per doctors	4,05	3,87	-0,18

Do you consider the ratios of doctors and nurses to population in your country sufficient? Please, mention any local/national initiatives and policy shifts that will affect this.

- ▶ The figures show a rise of personnel within the Dutch hospitals. What we see is a focus on more efficiency, a better division of labour force, differentiation of tasks between doctors and nurses. Moreover, as NVZ (Dutch Hospital Association) we have a lobby on Dutch government to create a separate Education fund for specialized nursing personnel.
- ▶ We see in the Dutch politics an increasing majority asking for collective labour agreements for medical specialists. Since most specialists in hospitals today have their own companies, it is possible that in future that might be changed into a different system, which would save a lot of public money. In 2010 government might introduce new laws about this subject.