

# SWEDEN

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 SALAR - Swedish Association of Local Authorities and Regions

## HEALTHCARE AND HOSPITAL EXPENDITURE

HEALTHCARE SYSTEM EXPENDITURE	2001	2006	Difference
1. Total health expenditure, PPP\$ per capita	2.508,00	3.124,00	+24,56%
2. Total inpatient expenditure, PPP\$ per capita	744,00	943,00	+26,75%
3. Total inpatient expenditure as % of total health expenditure	29,70%	30,20%	+0,50

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

- ▶ The rising of health expenditure is due to a combination of demographic changes, higher ambitions and medical-technical developments.

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?

- ▶ Increased need of acute care due to difficulties to create good cooperation regarding the care of the elderly (integrated care).

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

- ▶ That's too early to say. It depends on how Sweden gets out of the economic crisis. For the moment, we can see reductions of staff enforced by the current crisis. The economic crisis will probably lead to more structural reforms – concentration and specialization.

## HOSPITAL PROVISION

HOSPITAL PROVISION	2001	2006	Difference
4. Acute care hospital beds per 100.000 population	234,45	229,76*	-2,00%

*Note. Source: Swedish Association of Local Authorities and Regions (SALAR)*

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...?

- ▶ This reduction is the result of a change towards more polyclinic care and care outside the hospitals, in the patients' home.

ACUTE CARE HOSPITAL INDICATORS	2001	2006	Difference
5. Acute care admissions/discharges per 100 population	15,26%	15,20%	-0,06
6. Average length of stay for acute care hospitals (bed-days)	6,5	6,0	-0,5

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?

- ▶ The shorter average length of stay is an indication of more efficient care. This development goes hand in hand with better medical results.

## HEALTHCARE WORKFORCE

HEALTHCARE PROFESSIONALS	2001	2006	Difference
7. Physicians per 100.000 population	317,97	357,85	12,54%
8. Nurses per 100.000 population	1.005,17	1.083,40	7,78%
9. Rate of nurses per doctors	3,16	3,03	-0,13

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.

- ▶ Sweden has no equilibrium regarding the demand for and supply of doctors. There is a great demand in particular for specialists in general medicine, geriatrics and psychiatry. The successive expansion of the medical training will in ten years time considerably reduce the need of recruiting foreign doctors.
- ▶ The number of nurses working in the Swedish healthcare is continuously increasing. For the moment, there is a balance between education and recruitment, but if the trend continuous the nursing education has to be extended in order to avoid a shortage. The nursing specialities are reviewed in order to better match the needs of the healthcare. There is a lack of nurses specialized in anaesthesia, intensive care, operation (theatre nurse) and psychiatry.