Hospital beds by financing sector

Definitions

Updated: October 2019

<table>
<thead>
<tr>
<th>Beds in publicly owned hospitals</th>
<th>Beds in hospitals that are owned or controlled by a government unit or another public corporation (where control is defined as the ability to determine the general corporate policy).</th>
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<tbody>
<tr>
<td>Beds in not-for-profit privately owned hospitals</td>
<td>Beds in hospitals that are legal or social entities created for the purpose of producing goods and services, whose status does not permit them to be a source of income, profit, or other financial gain for the unit(s) that establish, control or finance them.</td>
</tr>
<tr>
<td>Beds in for-profit privately owned hospitals</td>
<td>Beds in hospitals that are legal entities set up for the purpose of producing goods and services and are capable of generating a profit or other financial gain for their owners.</td>
</tr>
</tbody>
</table>

Country specific notes

Belgium, Bulgaria, Czechia, Denmark, Germany, Estonia, Ireland, Greece, Spain, France, Croatia, Italy, Cyprus, Latvia, Lithuania, Luxembourg, Hungary, Malta, Netherlands, Austria, Poland, Portugal, Romania, Slovenia, Slovakia, Finland, Sweden, Iceland, Liechtenstein, Norway, Switzerland, Montenegro, North Macedonia, Albania, Serbia, Turkey, United Kingdom
Belgium

Beds in publicly owned hospitals

Source of data: Federal Service of Public Health, Food Chain Safety and Environment, DGGS, Data management; Central Institution Database (CIC).

Reference period: 31st of December for the list of hospitals.

Coverage:
- Included in the calculation are all beds (curative acute care beds, long-term-care beds and other hospital beds) in acute care hospitals, geriatric hospitals, specialised hospitals, psychiatric hospitals.
- In 2018, the whole time series on hospital beds were revised since 1988 to better match the definition.

- In 1994 there is a decrease in the number of beds due to the substitution of V-beds for long-term care into beds for long-term residential care.

Estimate:
- The year 2018 is an estimate because we’re still waiting probable minor changes in the structure of hospitals.

Beds in not-for-profit privately owned hospitals

Source of data: Federal Service of Public Health, Food Chain Safety and Environment, DGGS, Data management; Central Institution Database (CIC).

Reference period: 31st of December for the list of hospitals.

Coverage:
- Included in the calculation are all beds (curative acute care beds, long-term-care beds and other hospital beds) in acute care hospitals, geriatric hospitals, specialised hospitals, psychiatric hospitals.
- In 2018, the whole time series on hospital beds were revised since 1988 to better match the definition.

- In 1994 there is a decrease in the number of beds due to the substitution of V-beds for long-term care into beds for long-term residential care.

Estimate:
- The year 2018 is an estimate because we’re still waiting probable minor changes in the structure of hospitals.

Beds in for-profit privately owned hospitals

Data not available.

Bulgaria

Beds in publicly owned hospitals

Source of data: National Statistical Institute, Exhaustive annual survey.

Reference period: 31st of December.

Coverage: All disclosed beds in all types of publicly owned hospitals and dispensaries (HP.1 Hospitals).
Beds in not-for-profit privately owned hospitals
This category doesn't exist.

Beds in for-profit privately owned hospitals

Source of data: National Statistical Institute, Exhaustive annual survey.
Reference period: 31st of December.
Coverage: All disclosed Beds in for-profit privately owned hospitals (HP.1 Hospitals).

Czechia

Beds in publicly owned hospitals

Source of data: Institute of Health Information and Statistics of the Czech Republic. Survey on bed resources of health establishments and their exploitation. Since 2010 National Registry of Reimbursed Health Services
Reference period: End of the year.
Coverage:
- Providers: All available beds, since 2010 number of contracted beds, in hospitals and specialised therapeutic institutes (excluding balneologic institutes, institutes for long-term patients and hospices).
- Beds: Newborns’ cots are excluded.
- Type of institutions: Public corporations and general government institutional sectors.
- Data on hospital beds are not available by sector till 2007.
Break in time series: 2010.
- Since 2010, change in the data source - data refer to the number of contracted beds with health insurance companies.

Beds in not-for-profit privately owned hospitals

Source of data: Institute of Health Information and Statistics of the Czechia. Survey on bed resources of health establishments and their exploitation. Since 2010 National Registry of Reimbursed Health Services
Reference period: End of the year.
Coverage:
- Providers: All available beds, since 2010 number of contracted beds, in hospitals and specialised therapeutic institutes (excluding balneologic institutes, institutes for long-term patients and hospices).
- Beds: Newborns’ cots are excluded.
- Type of institutions: Non-profit institutions serving households institutional sector.
- Data on hospital beds are not available by sector till 2007.
Break in time series: 2010.
- Since 2010, change in the data source - data refer to the number of contracted beds with health insurance companies.

Beds in for-profit privately owned hospitals

Source of data: Institute of Health Information and Statistics of the Czechia. Survey on bed resources of health establishments and their exploitation. Since 2010 National Registry of
Reimbursed Health Services
Reference period: End of the year.

Coverage:
- Providers: All available beds, since 2010 number of contracted beds, in hospitals and specialised therapeutic institutes (excluding balneologic institutes, institutes for long-term patients and hospices).
- Beds: Newborns’ cots are excluded.
- Type of institutions: National private or foreign controlled corporations and household institutional sectors.
- Data on hospital beds are not available by sector till 2007.

Break in time series: 2010.
- Since 2010, change in the data source - data refer to the number of contracted beds with health insurance companies.

Denmark

Beds in publicly owned hospitals

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

Break in time series:
- For public hospitals, there is a break in 2011.
- There is no data for 2012.
- From 2014, data are not available for psychiatric care beds.

Beds in not-for-profit privately owned hospitals

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

Beds in for-profit privately owned hospitals

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

Break in the series: 2002. The reason for the break is that the privately owned hospitals in 2002 were forced by the state to provide data in order to receive financial support, which made the numbers grow very fast.
- In 2009, a new law gave the right to citizens to be treated in a privately owned hospital if the waiting time in public hospitals exceeded one month. Hence, this has led to the creation of new privately owned hospitals, and therefore the increase in the number of hospital beds.

Germany

Beds in publicly owned hospitals

Source of data: Federal Statistical Office, Hospital statistics 2017 (basic data of hospitals and prevention or rehabilitation facilities); Statistisches Bundesamt 2018, Fachserie 12, Reihe 6.1.1, table 1.4 and ibid, Fachserie 12, Reihe 6.1.2, table 1.4; http://www.destatis.de or http://www.gbe-bund.de.

Reference period: Annual average.

Coverage:
- Beds in publicly owned hospitals comprise beds in all hospitals (HP.1.1, 1.2 and 1.3) in the public sector.
- Public hospitals are defined as facilities which are maintained by municipal institutions, independent of their type of undertaking. For example, other public institutions are the federal government, a federal state, a higher community organisation or a foundation of the public law.
- Beds in public general hospitals, mental health hospitals and prevention and rehabilitation facilities are included.
- Comparable data before 2002 are not available.

**Beds in not-for-profit privately owned hospitals**

Source of data: [Federal Statistical Office](http://www.destatis.de), Hospital statistics 2017 (basic data of hospitals and prevention or rehabilitation facilities); Statistisches Bundesamt 2018, Fachserie 12, Reihe 6.1.1, table 1.4 and ibid, Fachserie 12, Reihe 6.1.2, table 1.4; [http://www.destatis.de](http://www.destatis.de) or [http://www.gbe-bund.de](http://www.gbe-bund.de).

Reference period: Annual average.

Coverage:
- Beds in not-for-profit owned hospitals comprise beds in all hospitals (HP.1.1, 1.2 and 1.3) in the not-for-profit sector.
- Not-for-profit hospitals are defined as facilities which are maintained by not-for-profit institutions. Not-for-profit institutions are institutions of free social welfare including religious communities covered by the public law.
- Beds in not-for-profit general hospitals, mental health hospitals and prevention and rehabilitation facilities are included.
- Comparable data before 2002 are not available.

**Beds in for-profit privately owned hospitals**

Source of data: [Federal Statistical Office](http://www.destatis.de), Hospital statistics 2017 (basic data of hospitals and prevention or rehabilitation facilities); Statistisches Bundesamt 2018, Fachserie 12, Reihe 6.1.1, table 1.4 and ibid, Fachserie 12, Reihe 6.1.2, table 1.4; [http://www.destatis.de](http://www.destatis.de) or [http://www.gbe-bund.de](http://www.gbe-bund.de).

Reference period: Annual average.

Coverage:
- Beds in for-profit privately owned hospitals comprise beds in all hospitals (HP.1.1, 1.2 and 1.3) in the private sector.
- Private hospitals are defined as facilities which are maintained by private commercial institutions. They require a concession as a business enterprise according to §30 Trade Regulation Act (“Gewerbeerordnung”).
- Beds in private general hospitals, mental health hospitals and prevention and rehabilitation facilities are included.
- Comparable data before 2002 are not available.

**Estonia**

**Beds in publicly owned hospitals**

Source of data:
- Since 1st January 2008 [National Institute for Health Development](http://www.tse.ee), Department of Health Statistics.
- Data from routinely collected health care statistics submitted by health care providers (monthly statistical report “Hospital beds and hospitalisation”) 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.
- Cots for neonates, day beds, provisional and temporary beds, and beds in storerooms are also excluded from the hospital beds.
- 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 on the definition of ownership, the data for 1999-2001 are currently not valid.

Break in time series:
- In Estonia, hospitals that provided only in-patient long-term care services (long-term care hospitals) were reorganised to the nursing care hospitals. This restructuration came into force according to the Health Services Organisation Act at the beginning of 2013 (https://www.riigiteataja.ee/en/eli/ee/Riigikogu/act/521012015003/consolide). Previous long-term care hospitals (HP.1) were classified amongst long-term nursing care facilities HP.2 according to the SHA2011 in 2013. Therefore, the total number of hospital beds decreased in 2013. The number of curative care beds, other beds (tuberculosis) and psychiatric beds were not influenced by this methodological change.

Beds in not-for-profit privately owned hospitals

Source of data:
- Since 1st January 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 hospitalisation") and data from Ministry of Financial Affairs.

Reference period: 31st December.

Coverage:
- All hospitals HP.1 are included.
- Legal form: foundations.
- Cots for neonates, day beds, provisional and temporary beds, and beds in storerooms are also excluded from the hospital beds.
- Beds in welfare institutions are excluded.
- Data before 2003 are not available.

Break in time series:
- In Estonia, hospitals that provided only in-patient long-term care services (long-term care hospitals) were reorganised to the nursing care hospitals. This restructuration came into force according to the Health Services Organisation Act at the beginning of 2013 (https://www.riigiteataja.ee/en/eli/ee/Riigikogu/act/521012015003/consolide). Previous long-term care hospitals (HP.1) were classified amongst long-term nursing care facilities HP.2 according to the SHA2011 in 2013. Therefore, the total number of hospital beds decreased in 2013. The number of curative care beds, other beds (tuberculosis) and psychiatric beds were not influenced by this methodological change.

Beds in for-profit privately owned hospitals

Source of data:
- Since 1st January 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 hospitalisation") and data from Commercial Register.

Reference period: 31st December.

Coverage:
- All hospitals HP.1 (private sector, i.e. more than 50% is owned by the Estonian or foreign person in
private law) are included.
- Cots for neonates, day beds, provisional and temporary beds, and beds in storerooms are also excluded from the hospital beds.
- 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 on the definition of ownership, the data for 1999-2001 are currently not valid.

Notes:
- In 2002, the Government of Estonia introduced the Hospital Master Plan that anticipates an optimum number of hospitals and hospital beds necessary to provide acute health care services taking into account the number of the population of Estonia and the population forecasts. Therefore, existing hospitals were reorganised, some became out-patient care providers, and some were closed or consolidated. This change can be called the second wave of the reorganisation of the Estonian health care system.
- In Estonia, hospitals that provided only in-patient long-term care services (long-term care hospitals) were reorganised to the nursing care hospitals. This restructuration came into force according to the Health Services Organisation Act at the beginning of 2013 (https://www.riigiteataja.ee/en/eli/ee/Riigikogu/act/521012015003/consolide). Previous long-term care hospitals (HP.1) were classified amongst long-term nursing care facilities HP.2 according to the SHA2011 in 2013. Therefore, the total number of hospital beds decreased in 2013. The number of curative care beds, other beds (tuberculosis) and psychiatric beds were not influenced by this methodological change.

Ireland

Beds in publicly owned hospitals
Data not available.

Beds in not-for-profit privately owned hospitals
Data not available.

Beds in for-profit privately owned hospitals
Data not available.

Greece

Beds in publicly owned hospitals

Source of data: Hellenic Statistical Authority (EL.STAT.), Hospital Census. Reference period: Annual average.

Beds in not-for-profit privately owned hospitals

Source of data: Hellenic Statistical Authority (EL.STAT.), Hospital Census. Reference period: Annual average.

Beds in for-profit privately owned hospitals

Source of data: Hellenic Statistical Authority (EL.STAT.), Hospital Census. Reference period: Annual average.
Spain

Beds in publicly owned hospitals

Source of data:
- Since 2010: Ministry of Health, Social Services and Equity from Specialised Care Information System (Sistema de Información de Atención Especializada - SIAE).

Reference period: Annual average.

Coverage:
- Public hospitals are those owned or managed by central, county, or city council government.
- Since 2010, data also include beds in hospitals dedicated to attention of work-related accident and occupational illnesses (Mutuas de Accidentes de Trabajo y Enfermedades Profesionales).

Break in time series: 2010.
- Some hospitals which were previously counted as private had to be included since 2010 in the publicly financed category following a new classification system (ECS 1995) introduced as framework for the new national hospital statistics in order to harmonize it with SHA financing scheme. According to that criteria, as NHS hospitals (public) are considered all publicly administered hospitals plus all hospitals with more than 80% of its activity publicly financed and also hospitals financed by the social security funds: network of hospitals dedicated to attention of work-related accident and occupational illnesses (nonprofit private hospitals previously included as private).

Beds in not-for-profit privately owned hospitals

Source of data:
- Since 2010: Ministry of Health, Social Services and Equity from Specialised Care Information System (Sistema de Información de Atención Especializada - SIAE).

Reference period: Annual average.

Coverage:
- Since 2010, data do not include beds in hospitals dedicated to attention of work-related accident and occupational illnesses (Mutuas de Accidentes de Trabajo y Enfermedades Profesionales).

Break in time series: 2010.
- Some hospitals which were previously counted as private had to be included since 2010 in the publicly financed category following a new classification system (ECS 1995) introduced as framework for the new national hospital statistics in order to harmonize it with SHA financing scheme. According to that criteria, as NHS hospitals (public) are considered all publicly administered hospitals plus all hospitals with more than 80% of its activity publicly financed and also hospitals financed by the social security funds: network of hospitals dedicated to attention of work-related accident and occupational illnesses (nonprofit private hospitals previously included as private).
Beds in for-profit privately owned hospitals

Source of data:
- Since 2010: Ministry of Health, Social Services and Equity from Specialised Care Information System (Sistema de Información de Atención Especializada - SIAE).

Reference period: Annual average.
Break in time series: 2010.
- Some hospitals which were previously counted as private had to be included since 2010 in the publicly financed category following a new classification system (ECS 1995) introduced as framework for the new national hospital statistics in order to harmonize it with SHA financing scheme. According to that criteria, as NHS hospitals (public) are considered all publicly administered hospitals plus all hospitals with more than 80% of its activity publicly financed and also hospitals financed by the social security funds: network of hospitals dedicated to attention of work-related accident and occupational illnesses (nonprofit private hospitals previously included as private).

France

Beds in publicly owned hospitals

Source of data: Ministère des Solidarités et de la Santé - Direction de la Recherche, des Études, de l'Évaluation et des Statistiques (DREES). Data are from the “Statistique Annuelle des Établissements de santé (SAE)”.

Note: This survey has been recasted in 2014 for the data concerning 2013 onwards (review and update of the questionnaire, change of the unit surveyed [from legal entity to geographical establishment], improvement of the consistency between the survey and an administrative source of data on the activity of hospitals). Though the principles of the survey remain the same, some concepts and some questions have changed: this can lead to break in series for the year 2013.

Reference period: 31st December.
Coverage:
- Data refer to metropolitan France and D.O.M. (overseas departments).
- Data include army hospitals from 2002 onwards.
- Data from 2013 cover geographical establishments for all sectors (public and private).

Beds in not-for-profit privately owned hospitals

Source of data: Ministère des Solidarités et de la Santé - Direction de la Recherche, des Études, de l'Évaluation et des Statistiques (DREES). Data are from the “Statistique Annuelle des Établissements de santé (SAE)”.

Note: This survey has been recasted in 2014 for the data concerning 2013 onwards (review and update of the questionnaire, change of the unit surveyed [from legal entity to geographical establishment], improvement of the consistency between the survey and an administrative source of data on the activity of hospitals). Though the principles of the survey remain the same, some concepts and some questions have changed: this can lead to break in series for the year 2013.
Reference period: 31st December.

Coverage:
- Data refer to metropolitan France and D.O.M. (overseas departments).
- Data from 2009 to 2012 were corrected in 2019, due to improperly classified hospitals: some beds in “for-profit privately owned hospitals” were partly added to beds in “not-for-profit privately owned hospitals”.
- Data from 2013 cover geographical establishments for all sectors (public and private).

Beds in for-profit privately owned hospitals

Source of data: Ministère des Solidarités et de la Santé - Direction de la Recherche, des Études, de l'Évaluation et des Statistiques (DREES). Data are from the “Statistique Annuelle des Établissements de santé (SAE)”. Note: This survey has been recasted in 2014 for the data concerning 2013 onwards (review and update of the questionnaire, change of the unit surveyed [from legal entity to geographical establishment], improvement of the consistency between the survey and an administrative source of data on the activity of hospitals). Though the principles of the survey remain the same, some concepts and some questions have changed: this can lead to break in series for the year 2013.

Reference period: 31st December.

Coverage:
- Data refer to metropolitan France and D.O.M. (overseas departments).
- Data from 2009 to 2012 were corrected in 2019, due to improperly classified hospitals: some beds in “for-profit privately owned hospitals” were partly added to beds in “not-for-profit privately owned hospitals”.
- Data from 2013 cover geographical establishments for all sectors (public and private).

Croatia

Beds in publicly owned hospitals

Source of data: Croatian Institute of Public Health, Hospital structure and function database. Coverage: Prison hospital not included.

Beds in not-for-profit privately owned hospitals

Source of data: Croatian Institute of Public Health, Hospital structure and function database.

Beds in for-profit privately owned hospitals

Source of data: Croatian Institute of Public Health, Hospital structure and function database.

Italy

Beds in publicly owned hospitals

Beds in not-for-profit privately owned hospitals

Reference period: Annual average.

Beds in for-profit privately owned hospitals

Reference period: Annual average.

Cyprus

Beds in publicly owned hospitals

Source of data: Statistical Service of Cyprus, Health and Hospital Statistics.
Reference period: 31st December.
Coverage: Up to 2016, all the beds of the publicly owned hospitals as defined above, except from the beds of the Bank of Cyprus Oncology Centre and the Cyprus Institute of Neurology and Genetics. In 2017 a break occurs, since the beds referring to the Bank of Cyprus Oncology Centre and the Cyprus Institute of Neurology and Genetics are included in the publicly owned hospitals.

Beds in not-for-profit privately owned hospitals

Not applicable for the case of Cyprus. As already mentioned above, no not-for-profit privately owned hospitals exist in Cyprus (the 2 institutions that are not-for-profit and privately owned are not considered as hospitals, since they offer only palliative care, i.e. Arodafnousa and Center for people with special needs).

Beds in for-profit privately owned hospitals

Reference period: 31st December.
Up to 2016, the beds of the Bank of Cyprus Oncology Centre and the Cyprus Institute of Neurology and Genetics have been included. In 2017 a break occurs, since the beds referring to the Bank of Cyprus Oncology Centre and the Cyprus Institute of Neurology and Genetics have been excluded and included in the publicly owned hospitals.

Latvia

Beds in publicly owned hospitals

Source of data: Centre for Disease Prevention and Control; Database of hospital beds' utilisation.
Note: The decrease in number of beds in publicly owned hospitals which occurred during the time of health care reforms could be caused by reorganisations in the public health care institutions (especially in 2009 when many hospitals were closed).

Beds in not-for-profit privately owned hospitals

Source of data: Centre for Disease Prevention and Control; Database of hospital beds' utilisation. 
Note: Not-for-profit privately owned hospitals do not exist in Latvia.

Beds in for-profit privately owned hospitals

Source of data: Centre for Disease Prevention and Control; Database of hospital beds' utilisation. 
Note: There were 2 private for-profit hospitals with tuberculosis and psychiatric beds in 2008. During 2009 and 2010, these hospitals were closed. In 2011, new hospitals were opened, including rehabilitation hospital with 220 beds. This is the reason for temporal decrease in the number of hospital beds in for-profit hospitals in years 2009 and 2010, and increase in year 2011.

Lithuania

Beds in publicly owned hospitals

Reference period: 31st December.

Beds in not-for-profit privately owned hospitals

Reference period: 31st December.

Beds in for-profit privately owned hospitals

Reference period: 31st December. 
Coverage: Data for private hospitals are not complete due to underreporting of private institutions. Private institutions are not very stable: some of them are working few years and then they are closed (bankrupt) or not functioning. For private hospitals sometimes it is complicated to make difference between hospital and day surgery centre. Therefore, the number of beds in private hospitals is not stable.

Luxembourg

Beds in publicly owned hospitals

Not applicable.
Beds in not-for-profit privately owned hospitals
Not applicable.

Beds in for-profit privately owned hospitals
Not applicable.

Hungary

Beds in publicly owned hospitals

Source of data:
Coverage: Number of hospital beds in university hospitals, public and local government hospitals, Hungarian National Railway hospitals, Ministries of Defence hospitals, Interior and Justice hospitals, and hospitals under contract with the National Health Insurance Fund.
Reference period: 31st December.
Break in time series:
- In 2007, the number of acute hospitals beds in hospitals under contract with Hungarian National Health Insurance Fund (OEP) decreased significantly, but the number of chronic beds increased.
- Since 2007, the number of hospital beds in justice hospitals is included.

Beds in not-for-profit privately owned hospitals

Source of data:
Coverage: This includes the number of hospital beds in church and foundation hospitals under contract with the Hungarian National Health Insurance Fund.
Reference period: 31st December.
Break in time series:
- In 2007, the number of acute hospitals beds in hospitals under contract with Hungarian National Health Insurance Fund (OEP) decreased significantly, but the number of chronic beds increased.

Beds in for-profit privately owned hospitals

Source of data:
Coverage: This includes the number of hospital beds in private hospitals under contract with Hungarian National Health Insurance Fund (OEP).
Reference period: 31st December.
Break in time series:
- In 2007, the number of acute hospitals beds in hospitals under contract with Hungarian National Health Insurance Fund (OEP) decreased significantly, but the number of chronic beds increased.

Malta

Beds in publicly owned hospitals

Source of data: Directorate for Health Information and Research from data supplied by the Institutions and Department of Health Care Standards within the Ministry for Energy and Health.
Coverage: 2012. An increase in the number of hospital beds was due to the addition of beds in a publicly owned rehabilitation hospital. The number of publicly owned hospital beds in 2013 has been amended due to incorrectly inputting the number of long-term care beds. The total number of publicly owned hospital beds in 2014 has decreased since a number of beds which were being used for overnight stays are now being used as day care beds.

Beds in not-for-profit privately owned hospitals
This category of hospitals does not exist in Malta

Beds in for-profit privately owned hospitals

Source of data: Directorate for Health Information and Research from data supplied by the Institutions and Department of Health Care Standards within the Ministry for Energy and Health. The number of beds decreased in 2011 due to the termination of one privately owned hospital

Coverage: 2012. An increase in the number of hospital beds was due to the addition of 1 privately owned rehabilitation hospital

Break in Series: From 2011 onwards the number of privately owned beds reflects the number of beds used exclusively for overnight stays and not used interchangeably between day care beds and overnight beds.

Netherlands

Beds in publicly owned hospitals
Data not available (applies only to prison and military hospitals).

Beds in not-for-profit privately owned hospitals

Source of data:
- 2006 onwards: Annual reports social account which the hospitals are required to deliver, plus data from the NZA (Dutch Health Authority).
- 2016: Annual reports social account (DigiMV)

Reference period:

Coverage: Beds in general, university and specialized hospitals, as well as in mental hospitals; includes beds for same-day care. Beds in a few hospices for terminal care and in nursing homes are not included.
- Until 2001: Excludes cots for healthy infants.
- From 2002: Includes cots for healthy infants.

Deviation from the definition:
- 1990-1993: Average number of licensed beds.
- 2006 onwards: Licensed beds.
- 2010 onwards: Actual beds reported by the hospitals.


Beds in for-profit privately owned hospitals
Data not available.
Austria

Beds in publicly owned hospitals

Reference period: 31st December.
Coverage:
- Included are all hospital beds in inpatient institutions as defined by the Austrian Hospital Act (KAKuG) and classified as HP.1 according to the System of Health Accounts (OECD).
- Included are beds in hospitals that are owned or controlled by the national or a regional government unit, a municipality or an association of municipalities, and by social insurance institutions.
- In Austria there are neither inpatient units nor units for same-day-care. Hospital beds are occupied by day clinic or fully inpatient patients as required. For this reason, it is not possible to differentiate between inpatient and same-day-beds.

Beds in not-for-profit privately owned hospitals

Reference period: 31st December.
Coverage:
- Included are all hospital beds in inpatient institutions as defined by the Austrian Hospital Act (KAKuG) and classified as HP.1 according to the System of Health Accounts (OECD).
- Included are beds in not-for-profit hospitals that are owned or controlled by religious orders and congregations, private persons, companies and associations.
- In Austria, there are neither inpatient units nor units for same-day-care. Hospital beds are occupied by day clinic or fully inpatient patients as required. For this reason, it is not possible to differentiate between inpatient and same-day-beds.

Beds in for-profit privately owned hospitals

Reference period: 31st December.
Coverage:
- Included are all hospital beds in inpatient institutions as defined by the Austrian Hospital Act (KAKuG) and classified as HP.1 according to the System of Health Accounts (OECD).
- Included are beds in for-profit hospitals that are owned or controlled by religious orders and congregations, private persons, companies and associations.
- In Austria, there are neither inpatient units nor units for same-day-care. Hospital beds are occupied by day clinic or fully inpatient patients as required. For this reason, it is not possible to differentiate between inpatient and same-day-beds.

Poland

Beds in publicly owned hospitals

Source of data: The Ministry of Health, the Ministry of National Defense, the Ministry of Interior
and Administration and the Central Statistical Office.  
Reference period: 31st December.  
Coverage: General hospitals, health resort hospitals and psychiatric hospitals. Prison hospitals are excluded.

**Beds in not-for-profit privately owned hospitals**

Source of data: The Ministry of Health, the Ministry of National Defence and the Ministry of Interior and Administration, and the Central Statistical Office.  
Reference period: 31st December.  
Coverage: Not-for-profit privately owned hospitals do not exist in Poland.

**Beds in for-profit privately owned hospitals**

Source of data: The Ministry of Health and Central Statistical Office.  
Reference period: 31st December.  
Coverage: General hospitals and health resort hospitals (including companies with State Treasury participation).

**Portugal**

**Beds in publicly owned 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 official public hospital beds.  

**Beds in not-for-profit privately owned 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 beds in not-for-profit private hospitals.  

**Beds in for-profit privately owned 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.

Romania

Beds in publicly owned hospitals

Source of data: National Institute of Statistics.
Reference period: data as of 31st December.
Coverage: The major differences in the number of beds are due to multiple changes in the sanitary network from Romania and the aim to have a more efficient sanitary activity.

Beds in not-for-profit privately owned hospitals

Source of data: National Institute of Statistics, Activity of Sanitary Units – annual survey performed by NIS.
Reference period: data as of 31st December.
Coverage: Data cover private sector.

Beds in for-profit privately owned hospitals

Source of data: National Institute of Statistics.
Reference period: data as of 31st December.
Coverage: Data cover private sector.
The major differences appearing in the number of beds are due to multiple changes in the sanitary network in Romania and to the aim to have a more efficient sanitary activity.

Slovenia

Beds in publicly owned hospitals

Source of data: National Institute of Public Health, Slovenia, National Hospital Health Care Statistics Database.
Reference: Annual average.

Beds in not-for-profit privately owned hospitals

Source of data: National Institute of Public Health, Slovenia, National Hospital Health Care Statistics Database.
Reference: Annual average.

Beds in for-profit privately owned hospitals

Source of data: National Institute of Public Health, Slovenia, National Hospital Health Care Statistics Database.
Reference: Annual average.

Slovakia
**Beds in publicly owned hospitals**
Data not available.

**Beds in not-for-profit privately owned hospitals**
Data not available.

**Beds in for-profit privately owned hospitals**
Data not available.

**Finland**

**Beds in publicly owned hospitals**

*Source of data:* National Institute for Health and Welfare (THL), Care Register for Institutional Health Care.
*Estimation method:* Since 1994, calculated bed-days/365 or 366.
*Break in time series:* 2000. The series was recalculated from 2000 onwards to correspond to the SHA 2011 definitions.

**Beds in not-for-profit privately owned hospitals**

Data not available. These data are included with 'for-profit privately owned hospitals' as private hospitals cannot be split into not-for-profit and for profit hospitals.

**Beds in for-profit privately owned hospitals**

*Source of data:* National Institute for Health and Welfare (THL), Care Register for Institutional Health Care.
*Coverage:* All private hospitals (private hospitals cannot be split into not-for-profit and for profit hospitals).
*Break in time series:* 2000. The series was recalculated from 2000 onwards to correspond to the SHA 2011 definitions.

**Sweden**

**Beds in publicly owned hospitals**

Data not available.

**Beds in not-for-profit privately owned hospitals**

Data not available.

**Beds in for-profit privately owned hospitals**

Data not available.

**Iceland**

**Beds in publicly owned hospitals**

*Source of data:* The Ministry of Welfare.
Beds in not-for-profit privately owned hospitals

Source of data: The Ministry of Welfare.

Beds in for-profit privately owned hospitals

There are no for-profit privately owned hospitals.

Liechtenstein

Beds in publicly owned hospitals

Source of data: data report from hospitals.

Coverage: 100%

Break in time series: Due to an outsource in 2009 from the Hospital to a long term care facility, the number of LTC-beds and subsequently also the total number of beds in hospitals is lower.

Beds in not-for-profit privately owned hospitals

Source of data: data report from hospitals.

Coverage: 100%

Beds in for-profit privately owned hospitals

Source of data: data report from hospitals.

Coverage: 100%.


Norway

Beds in publicly owned hospitals


Reference period: Annual average.

Coverage: The figures cover all beds in hospitals (HP.1) owned by Government.

Beds in not-for-profit privately owned hospitals

Data not available.

Beds in for-profit privately owned hospitals

Data not available.

Switzerland

Beds in publicly owned hospitals

Data not available.

Note: Differentiation according to ownership and profit is not relevant in Swiss health system.
Beds in not-for-profit privately owned hospitals
Data not available.
Note: Differentiation according to ownership and profit is not relevant in Swiss health system.

Beds in for-profit privately owned hospitals
Data not available.
Note: Differentiation according to ownership and profit is not relevant in Swiss health system.

Montenegro

Beds in publicly owned hospitals
Source of data: The source for all data submitted is the Institute of Public Health. Some additional information can be found in Health Statistical Yearbooks available at http://www.ijzcg.me/. Reference period: December 31st. Coverage: Beds in Stationary Medical centers are also included.

Beds in not-for-profit privately owned hospitals
The category does not exist.

Beds in for-profit privately owned hospitals
Data not available.

North Macedonia

Beds in publicly owned hospitals

Beds in not-for-profit privately owned hospitals
There are no not-for-profit privately owned hospitals in Macedonia.

Beds in for-profit privately owned hospitals

Albania

Beds in publicly owned hospitals
Data not available.

Beds in not-for-profit privately owned hospitals
Data not available.

Beds in for-profit privately owned hospitals
Data not available.
Serbia

Beds in publicly owned hospitals

Reference period: 31st of December.
Coverage: Data for Kosovo-Metohija province are not included in the coverage of data for the Republic of Serbia. Data from health institutions under other ministries (military services, prisons, social services) than the Ministry of Health are not included.

Beds in not-for-profit privately owned hospitals
Data not available.

Beds in for-profit privately owned hospitals
Data not available.

Turkey

Beds in publicly owned hospitals

Source of data: General Directorate for Health Services, Ministry of Health.
Coverage:
- Beds in publically owned hospitals include the total number of beds in all publically owned hospitals in the MoH, public universities, private and other sector (other public establishments, local administrations and since 2012 MoND-affiliated facilities).
- In 2017, the whole series has been updated from 2000 onwards because of the reallocation of private university hospitals from "publicly owned hospitals" into "for-profit privately owned hospitals".

Beds in not-for-profit privately owned hospitals
There are no beds in not-for-profit privately owned hospitals corresponding to the description in Turkey.

Beds in for-profit privately owned hospitals

Source of data: General Directorate Health Services, Ministry of Health.
Coverage:
- Beds in for-profit privately owned hospitals include the total number of beds in all for-profit privately owned hospitals (including hospitals owned by private universities).
- In 2017, the whole series has been updated from 2000 onwards because of the reallocation of private university hospitals from "publicly owned hospitals" into "for-profit privately owned hospitals".

United Kingdom

Beds in publicly owned hospitals

Source of data:
- **England** - Department of Health, from KH03, England;
- **Northern Ireland** - Hospital Activity Statistics from the Department of Health, Korner Return Kh03a;

Reference period: Annual average.

**Coverage:**
- Data are for financial years (1\(^{st}\) April to 31\(^{st}\) March). E.g. data for financial year 1\(^{st}\) April 2008 - 31\(^{st}\) March 2009 are presented as 2008.

**Deviation from the definition:**
- **Northern Ireland**: Cots for healthy infants cannot be excluded from figures.

**Break in time series:**
- **England**: The data from 2010 is lower because the methodology changed. From Quarter 1 2010/2011 the KH03 collection was changed to a quarterly collection. The classification for bed occupancy was changed from ward type to the consultant specialty of the responsible consultant. This followed consultation with the NHS, as concerns had been expressed that the ward classifications, which were set in the late 1980s, were no longer relevant.

**Beds in not-for-profit privately owned hospitals**

Data not available.

**Beds in for-profit privately owned hospitals**

Data not available.