

4. HEALTH CARE ACTIVITIES

4.5. Average length of stay in hospitals

The average length of stay in hospitals (ALOS) is often used as an indicator of efficiency. All other things being equal, a shorter stay will reduce the cost per discharge and shift care from inpatient to less expensive post-acute settings. However, shorter stays tend to be more service intensive and more costly per day. Too short a length of stay could also cause adverse effects on health outcomes, or reduce the comfort and recovery of the patient. If this leads to a greater readmission rate, costs per episode of illness may fall only slightly, or even rise.

In 2009, the average length of stay in hospitals for all causes among OECD countries was the lowest in Mexico, Turkey and Israel. It was also low in Norway and Denmark, as well as in the United States, all at less than five days. The average length of stay was highest in Japan, followed by Korea. The OECD average was about 7 days (Figure 4.5.1). Several factors can explain these cross-country differences. The abundant supply of beds and the structure of hospital payments in Japan provide hospitals with incentives to keep patients longer (see Indicator 4.3 “Hospital beds”). Financial incentives inherent in hospital payment methods can also influence length of stay in other countries.

The average length of stay in hospitals has fallen over the past decade in nearly all OECD countries – from 8.2 days in 2000 to 7.2 days in 2009 on average across OECD countries. It fell particularly quickly in some of the countries that had relatively high levels in 2000 (*e.g.* Japan, Switzerland and the United Kingdom). Several factors explain this decline, including the use of less invasive surgical procedures, changes in hospital payment methods, and the expansion of early discharge programmes which enable patients to return to their home to receive follow-up care.

Focusing on average length of stay for specific diseases or conditions can remove the effect of different mix and severity of conditions leading to hospitalisation across countries. Figure 4.5.3 shows that ALOS following a normal delivery ranges from less than two days in Mexico, Turkey,

the United Kingdom, Iceland and Canada, to over 5 days in the Slovak Republic and Switzerland. ALOS for normal delivery has become shorter in nearly all countries over the past decade.

Lengths of stay following acute myocardial infarction (AMI, or heart attack) also declined over the past decade. In 2009, ALOS following AMI was the lowest in Turkey and some of the Nordic countries (Norway, Denmark and Sweden), at less than five days. It was the highest in Korea, Germany, Greece, Finland and Estonia, at around ten days or more (Figure 4.5.2). However, care is required in making cross-country comparisons. For example, ALOS in Finland may include patients originally admitted for AMI but who are no longer receiving acute care, and might therefore be considered long-term care patients.

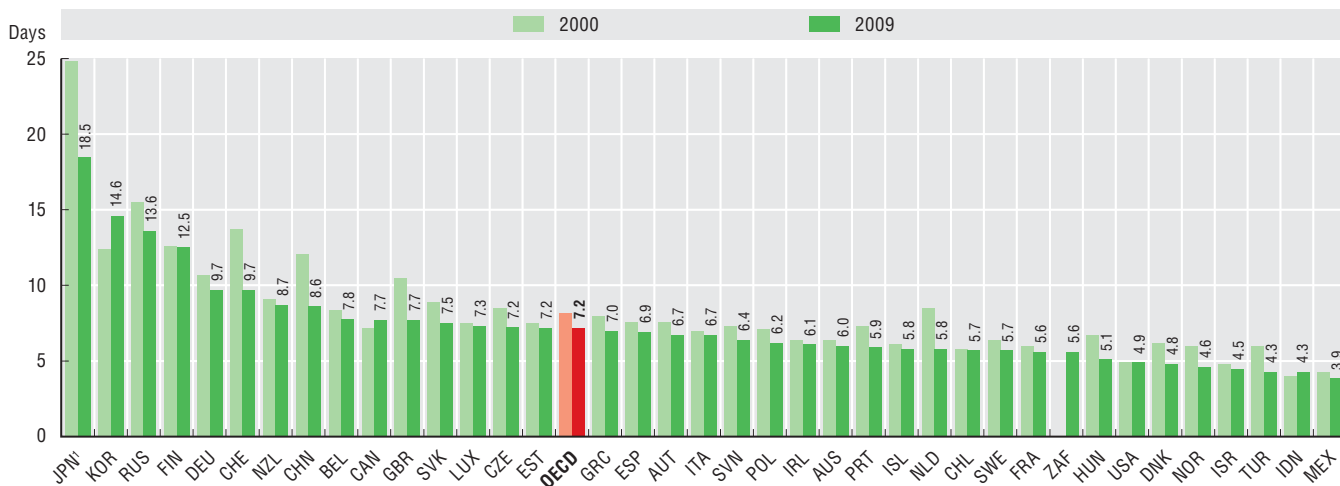
Definition and deviations

Average length of stay (ALOS) refers to the average number of days that patients spend in hospital. It is generally measured by dividing the total number of days stayed by all inpatients during a year by the number of admissions or discharges. Day cases are excluded.

In the calculation of ALOS, days and discharges of healthy babies born in hospitals are excluded in several countries (*e.g.* Australia, Austria, Canada, Chile, Estonia, Finland, Greece, Ireland, Israel, Japan, Korea, Luxembourg, Mexico, Spain, Sweden, Turkey). Including healthy newborns would reduce the ALOS in these countries (*e.g.* by 0.6 day in Canada).

Information on data for Israel: <http://dx.doi.org/10.1787/888932315602>.

4.5.1 Average length of stay in hospital for all causes, 2000 and 2009 (or nearest year)

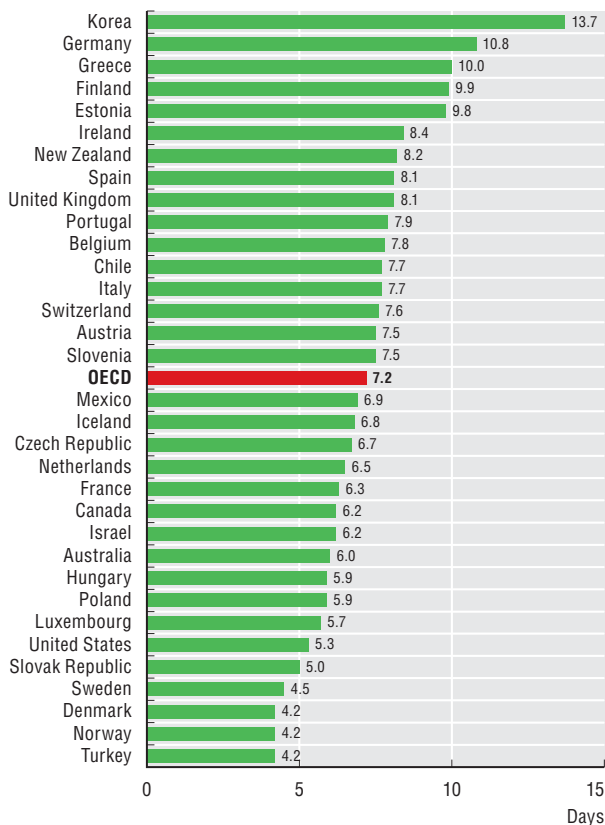


1. The data for Japan refer to average length of stay for acute care (excluding long-term care beds in hospitals).

Source: OECD Health Data 2011; WHO-Europe for the Russian Federation and national sources for other non-OECD countries.

StatLink <http://dx.doi.org/10.1787/888932524659>

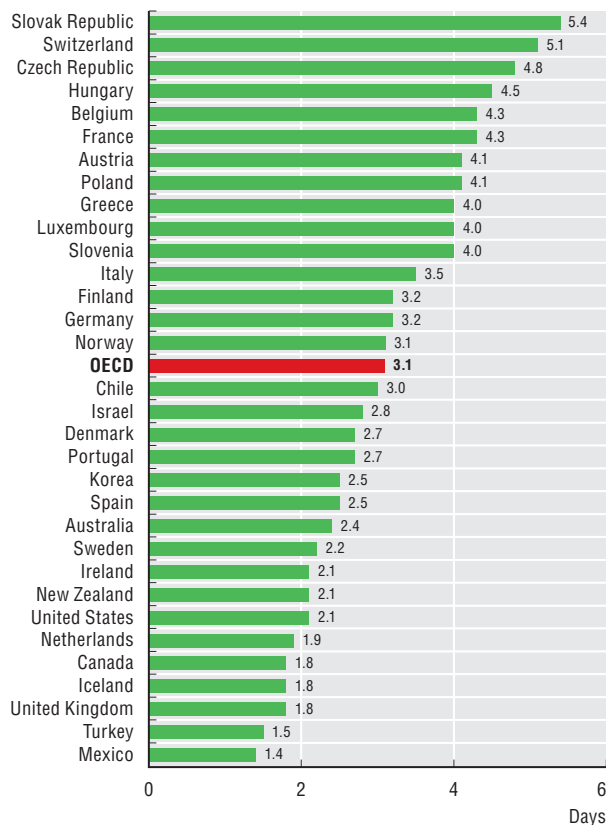
4.5.2 Average length of stay following acute myocardial infarction (AMI), 2009 (or nearest year)



Source: OECD Health Data 2011.

StatLink <http://dx.doi.org/10.1787/888932524678>

4.5.3 Average length of stay for normal delivery, 2009 (or nearest year)



Source: OECD Health Data 2011.

StatLink <http://dx.doi.org/10.1787/888932524697>



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