The Value of Quality: What Poor Care Costs and What Better Care Returns

Katherine De Bienassis, senior health policy analyst, The Organisation for Economic Co operation and Development (OECD)

Sundhedsvæsenets Kvalitetsinstitut

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Employment, Labour and Social Affairs

OECD

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Slido word cloud

In a word or two: where does your health system lose the most value?

Scan QR-code or join at slido.com with the code: SUNDK26

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Health at the OECD

38 member countries

- We collect, standardise and publish international **health statistics**
- Provide an **international forum** for health policy and health system performance
- Conduct **economic analysis** of health systems and make health policy proposals



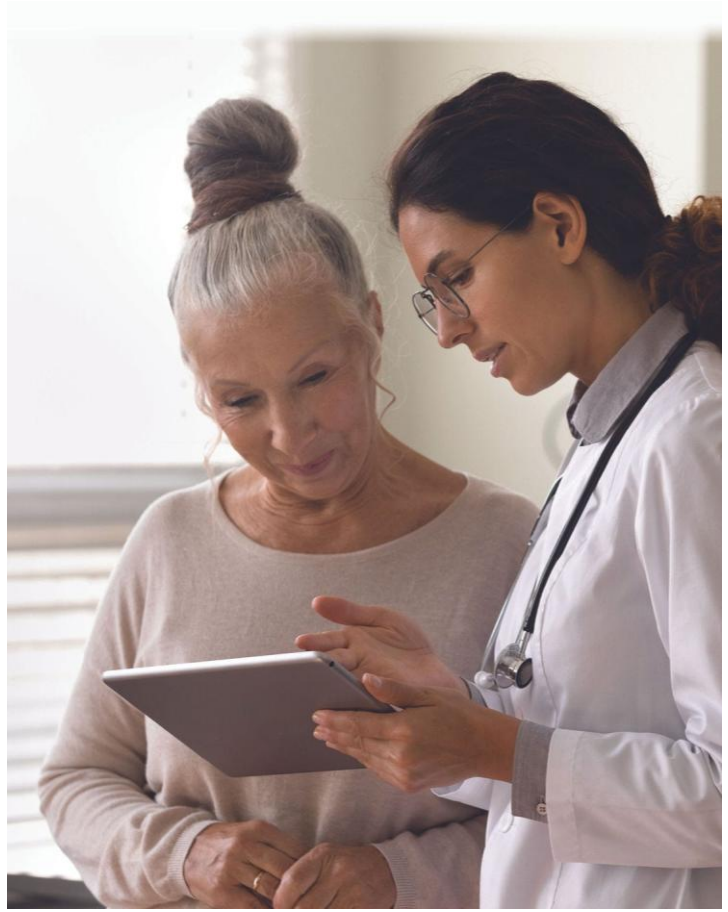
OECD
BETTER POLICIES FOR BETTER LIVES

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Cutting the burden of low-value care

Across OECD countries:

- **3 million premature deaths** among people aged under 75 **could have been avoided**.
- **Avoidable hospital admissions vary** 7-fold for diabetes and 12-fold for congestive heart failure.
- Up to **15% of diagnoses are estimated to be inaccurate, delayed or wrong**.
- 4 in 10 primary care patients report **poor experiences with care coordination.**



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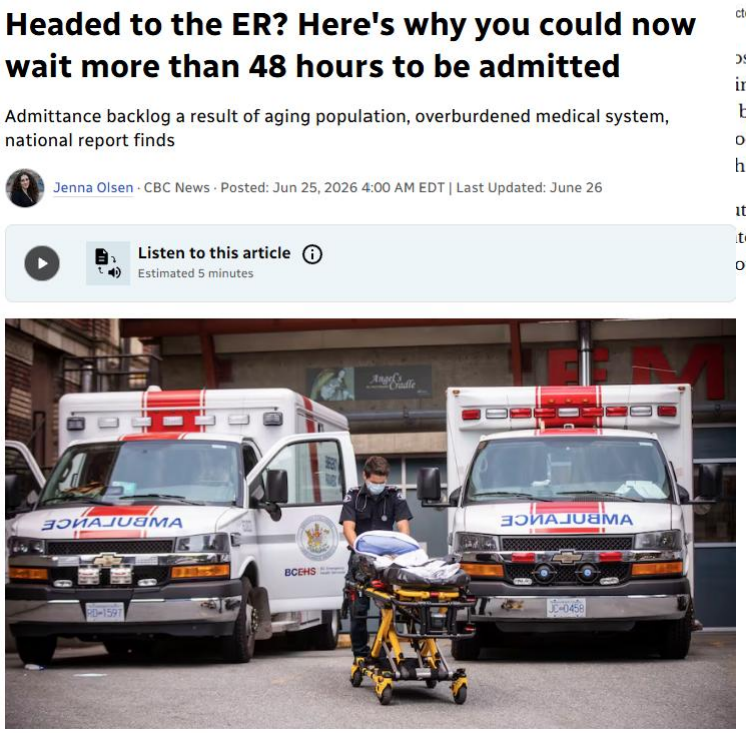
The health system sustainability's challenge is here





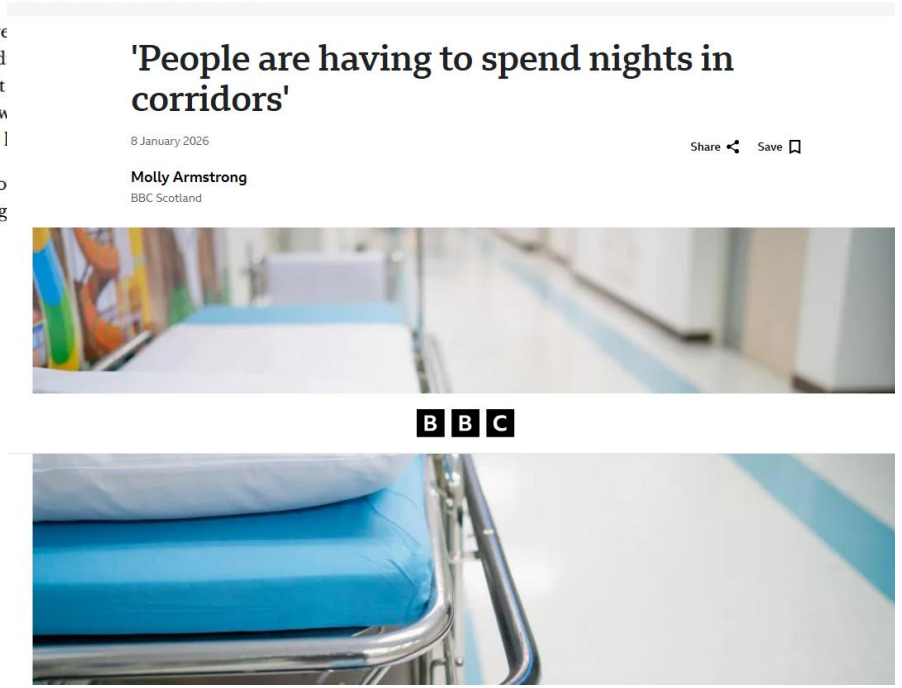
ctorian hospital that would benefit from a retrofit. James Scott Vandeventer, CC BY-NC-ND





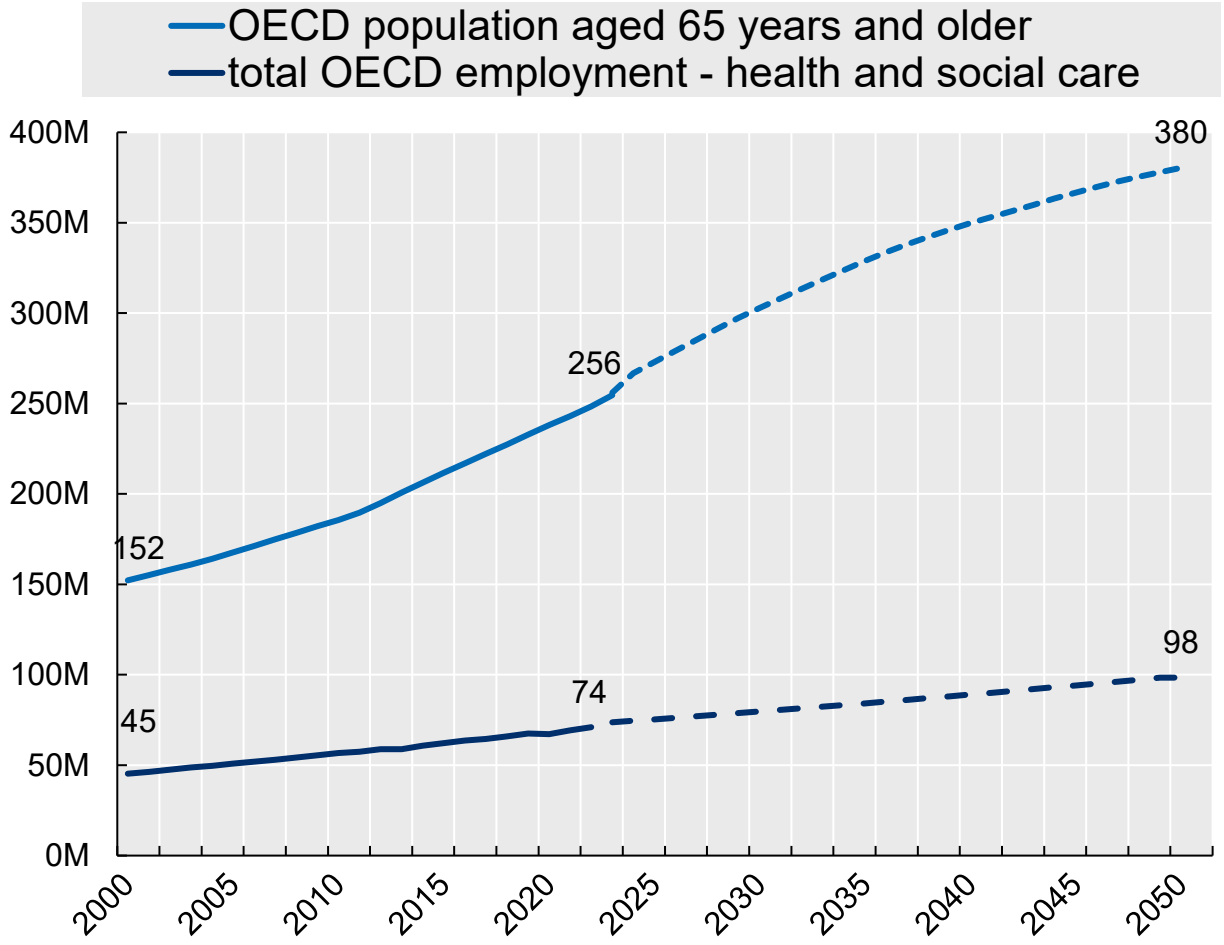
ospital visits usually involve
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Ageing populations and workforce constraints: A structural sustainability challenge

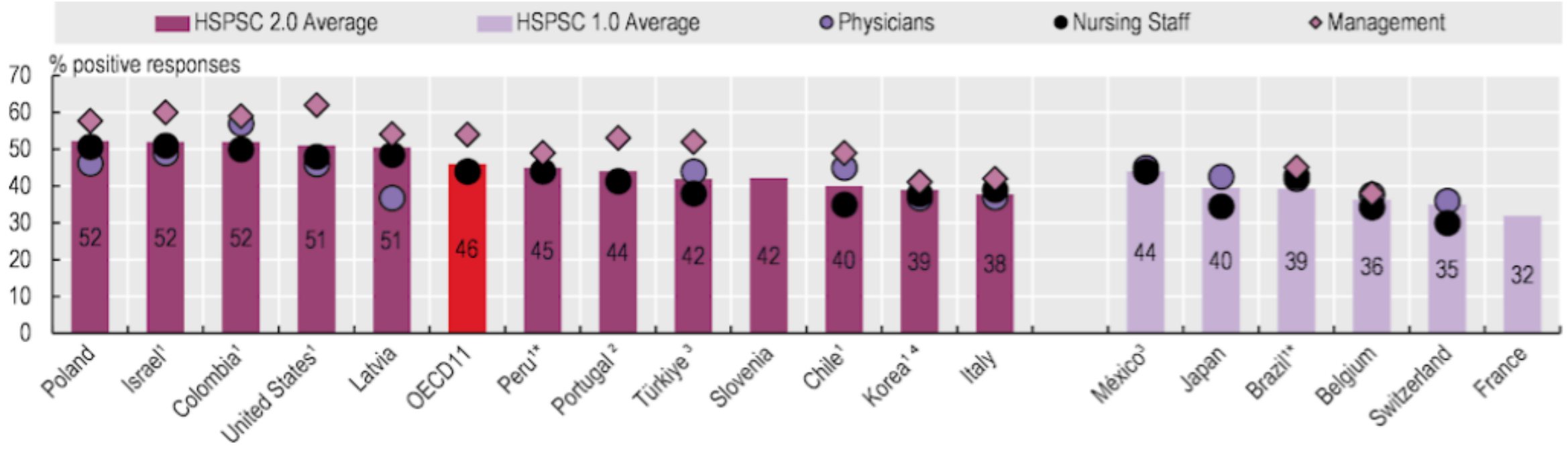


- **Demand surge**: By 2050, +50% elderly population vs. -5% working-age population.
- **Supply squeeze**: 1 in 3 physicians are over 55; shortages persist despite +60% workforce growth since 2000.
- **Economic limits**: health and social sector is already 11% of OECD employment, constraining further headcount growth.

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Fewer than half of hospital staff say staffing is adequate for safe care

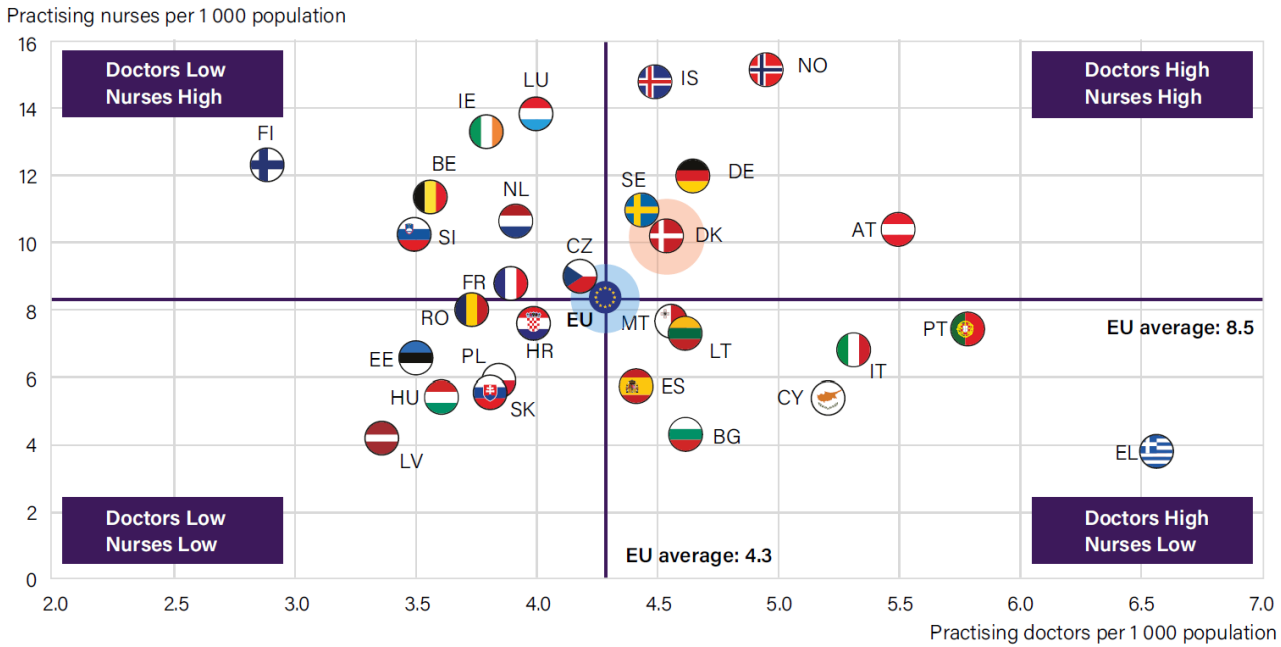
Health workers' perceptions of adequate staff levels and work pace, by job category, 2023 (or nearest year)



1. Latest data from 2020-2022. 2. Latest data from 2025. 3. Latest data from 2024. 4. Voluntary data submitted from 15 hospitals. * Accession/partner country.

Source: OECD Health Statistics 2025 and de Bienassis and Klazinga (2024[3]).

More doctors and nurses than the EU average, unevenly spread across regions



Notes: The EU average is unweighted. The data on nurses include all categories of nurses (not only those meeting the EU Directive on the Recognition of Professional Qualifications). In Portugal and Greece, data refer to all doctors licensed to practice, resulting in a large overestimation of the number of practising doctors. In Greece, the number of nurses is underestimated as it only includes those working in hospital.
Source: OECD Data Explorer (DF_PHYS, DF_NURSE). Data refer to 2023 or nearest year.

The number of doctors per population varies markedly across regions



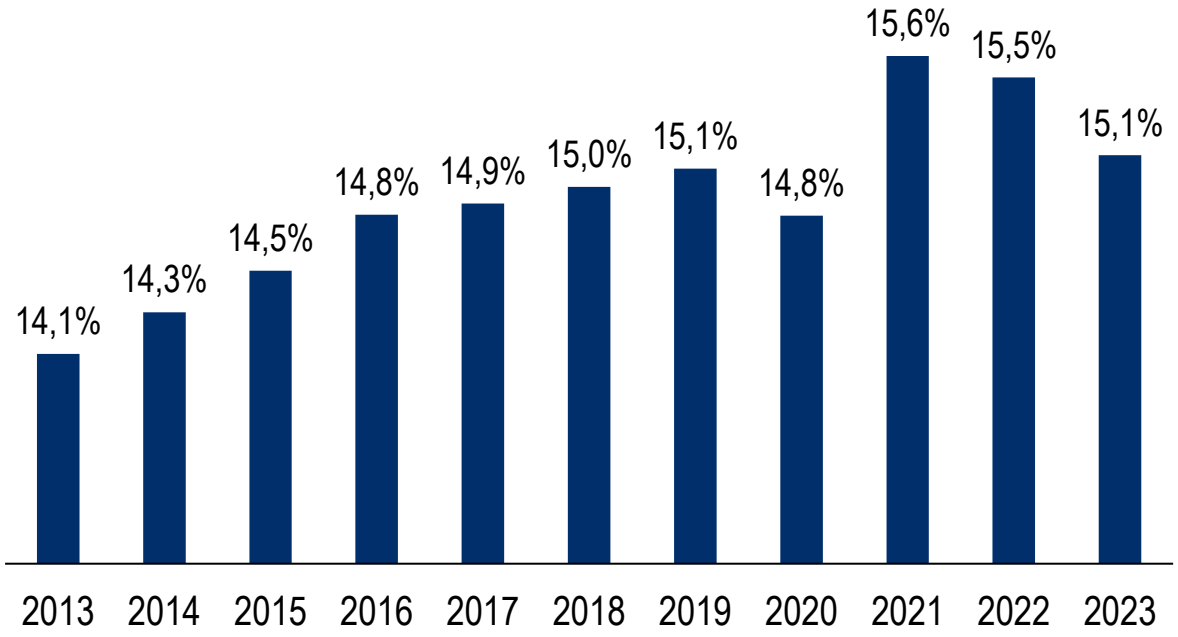
Physicians per 1 000 population
< 4.3 | 4.3–5.2 | ≥ 5.2

Source: Eurostat Database (hlth_rs_physreg). Data refer to 2021.

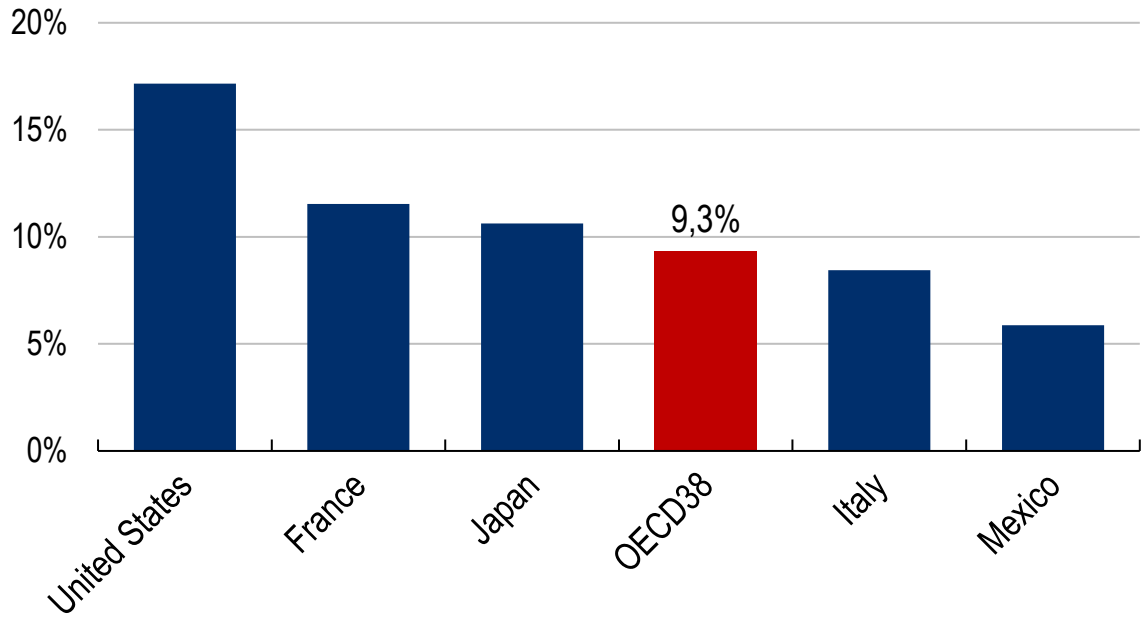
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Health systems already account for 10% of economic output and 15% of government spending

Health expenditure from public sources as a share of total government expenditure, OECD



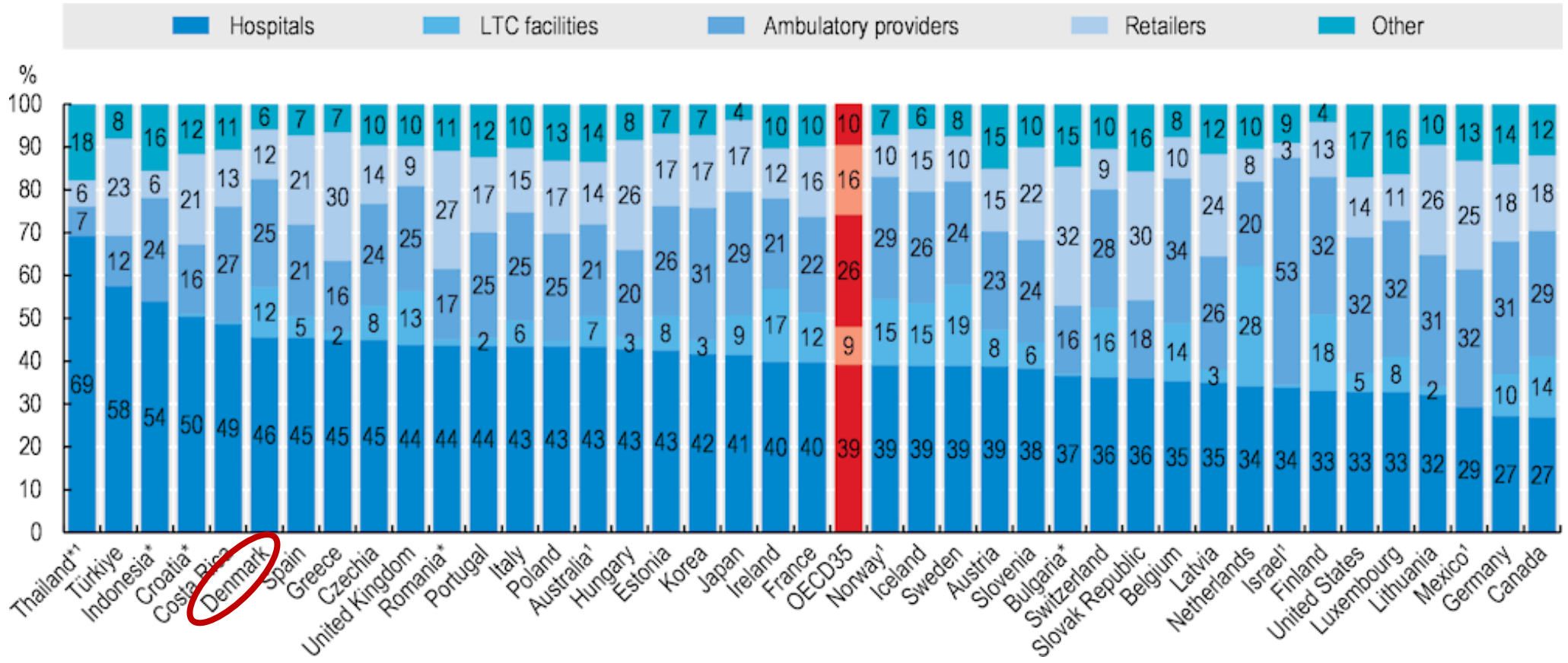
Health <u>expenditure</u> as a share of GDP, OECD 2024 (or nearest year)



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The largest part of health spending is directed to hospitals

Health expenditure by provider, 2023 (or nearest year)



Note: "Other" includes ancillary service providers (e.g. patient transport and laboratories); health system administration, public health and prevention agencies; households in cases where they provide paid LTC; and atypical providers, where healthcare is a secondary economic activity. 1. 2022 data. *Accession/partner country.
Source: OECD Health Statistics 2025.

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Many systems struggle to provide care that is truly centred on the needs of populations.

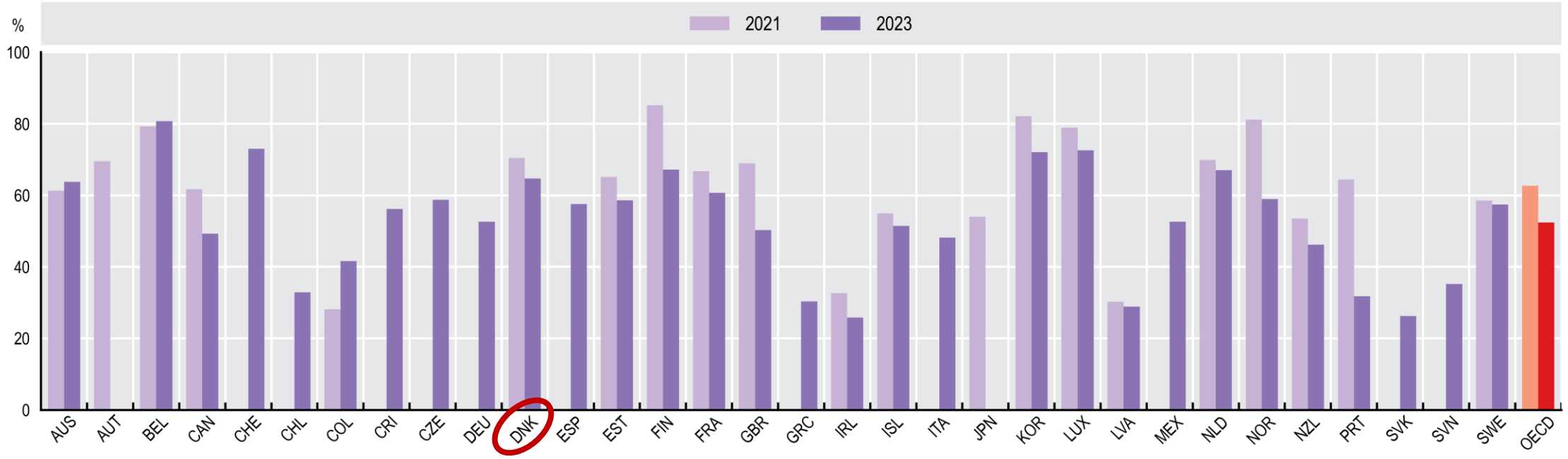


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Trust in health systems goes hand-in-hand with trust in public institutions …

Citizen satisfaction with healthcare services, 2021 and 2023

Share of population with high or moderatley high satisfaction with healthcare services



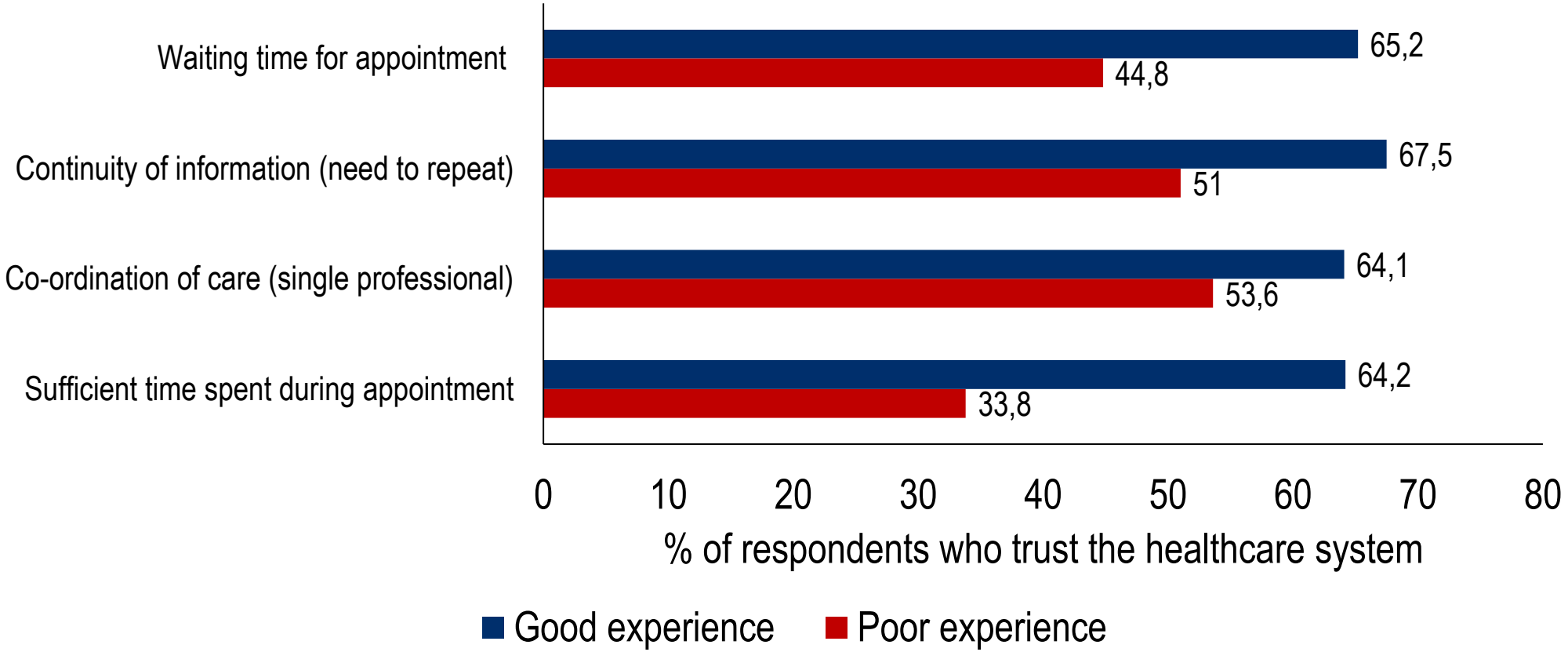
Note: "OECD" presents the unweighted average across countries. Refers to the question "On a scale of 0 to 10, how satisfied or dissatisfied are you with the healthcare system in [country] as a whole?" Satisfied corresponds to responses of 6-10.

Source: OECD Trust Survey 2023.

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… and trust in health systems is driven by patient experience

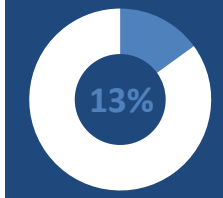
Trust in health systems among PaRIS respondents by aspect of patient health care experience



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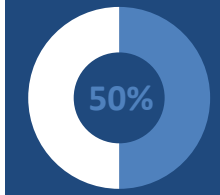
The cost of patient safety incidents is massive…





About **13% of expenditure is devoted to treating the effects of safety lapses** during inpatient care in OECD countries





50% of patient harm occurs in this setting, **up to 80% of which could be prevented**

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Unsafe care is an economic drag

USD 1–2 trillion

Estimated wider social cost of patient harm each year, using willingness-to-pay methods

0.7%

Estimated addition to annual global economic growth if harm were eliminated Beyond the health budget

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Potential cost savings from reducing diagnostic error are substantial

Invest **0.8%** in diagnostic safety

halve diagnostic error rates

Save **8%** healthcare expenditure

…Diagnostic error costs an estimated **17.5% of health expenditure**

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Prevention pays, often several times over

Intervention	Estimated return or impact
Preventing healthcare-associated infections	Median return of about 7 to 1
Multi-site infection programmes	About 3 to 1 to 4 to 1
US Medicare hospital-acquired condition programme	25 000 lives and USD 7.7 bn saved over three years
Electronic medication ordering, EU	EUR 6 bn estimated savings
Pressure ulcer prevention, EU	EUR 2 bn estimated savings
Improved clinical handover	About EUR 214 per QALY gained (single hospital study)

Source: Slawomirski and Klazinga (2022), “The economics of patient safety: From analysis to action”, OECD Health Working Papers, No. 145, drawing on published evaluations.

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Slido ranking

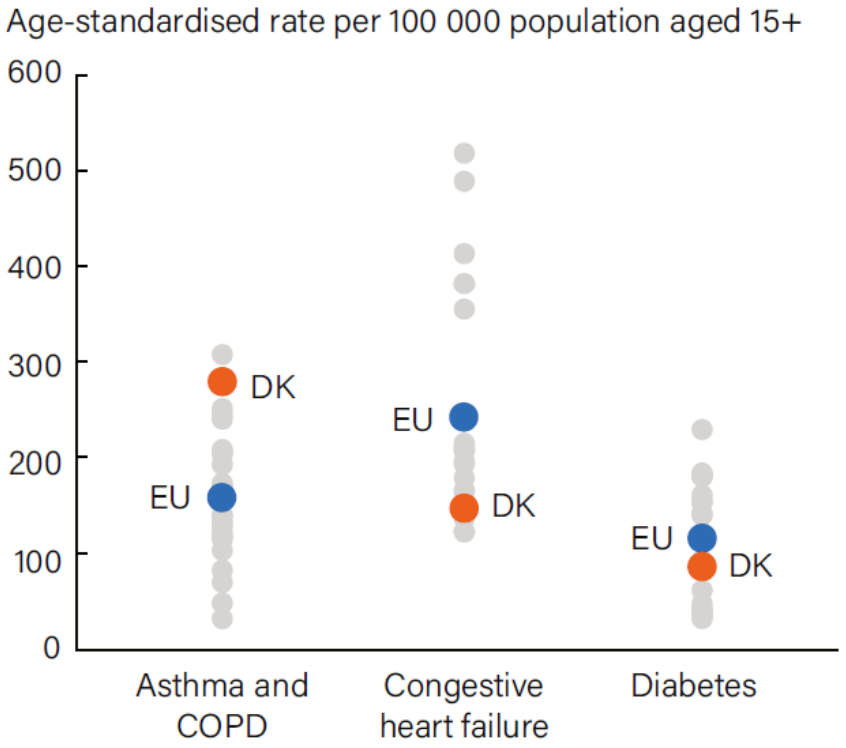
Where would extra investment in quality return most in Denmark?

- Diagnostic safety
- Medication safety at transitions of care
- Safety in municipal and long-term care
- Coordinated care for chronic conditions
- Safety culture and workforce

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Dashboard on quality of care, 2023 (unless indicated)

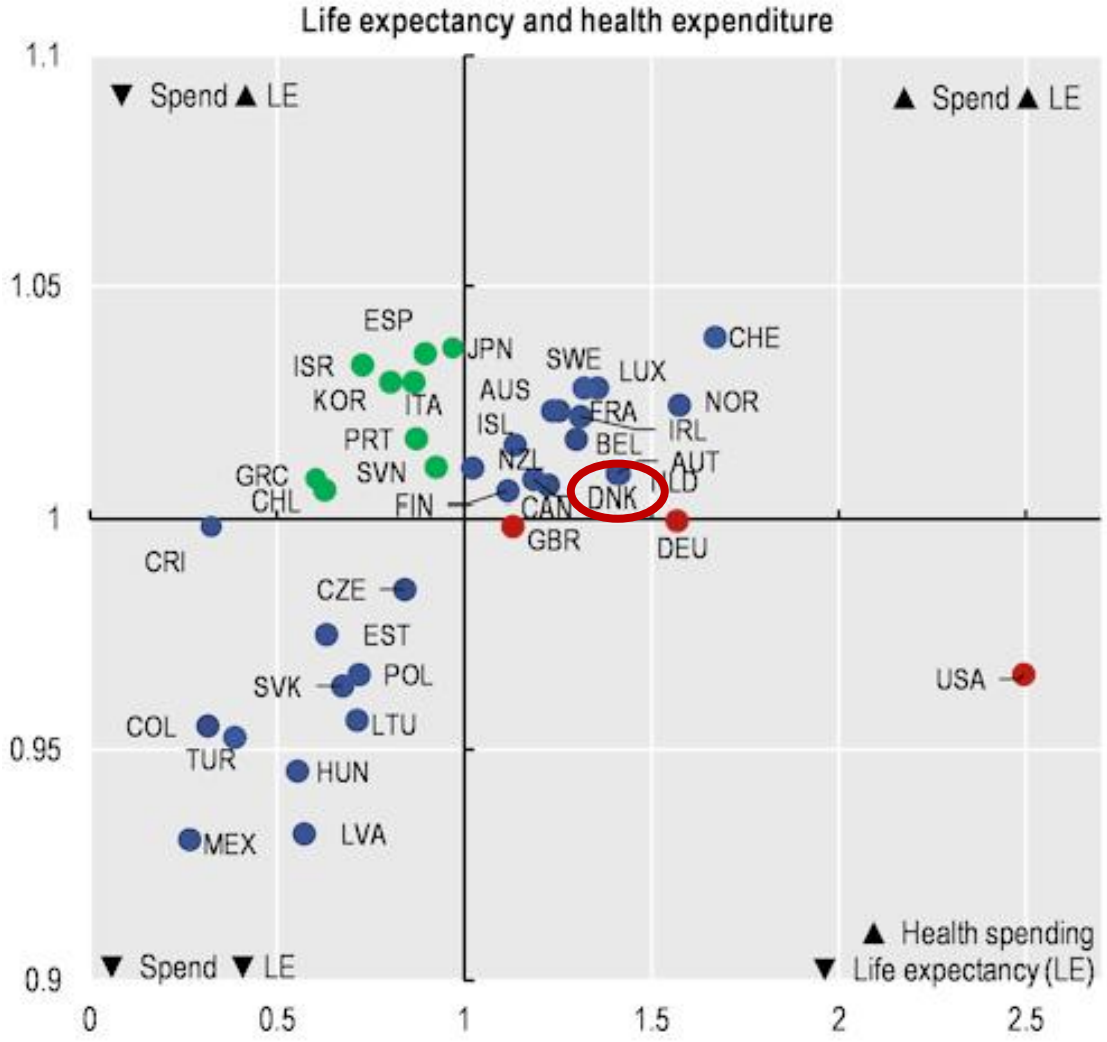
	Safe primary care[1]		Effective primary care[2]		Effective preventive care[3]		Effective secondary care[4]		
	Antibiotics prescribed (defined daily dose per 1 000 people		Avoidable hospital admissions (per 100 000 people, age-sex standardised)		Mammography screening within the past 2 years (% women aged 50-69)		AMI	Stroke	
							30-day mortality following AMI or stroke (per 100 000 people, age-sex standardised, unlinked data)		
OECD	**15.6**	**+**	**473**	**+**	**55.9**	**+**	**6.5**	**7.7**	**+**
				+	51.3	-	3.3	4.1	+
				+	40.1	+	6.0	6.0	+
				+	58.0	-	7.0	8.0	+
				+	N/A	N/A	4.5	7.6	+
				+	39.5	+	8.3	8.7	+
				N/A	N/A	N/A	N/A	N/A	N/A
				+	21.7	-	N/A	N/A	N/A
				+	60.3	+	5.2	8.1	+
				+	83.3	-	4.5	4.9	+
				+	64.5	+	9.1	8.0	+
				+	81.5	-	7.0	9.4	+
				N/A	46.7	-	N/A	N/A	N/A
				+	52.0	-	7.9	7.0	=
				N/A	14.5	N/A	N/A	N/A	N/A
				N/A	47.7	+	6.5	7.7	+
				+	56.0	-	2.5	8.9	+
				+	69.3	-	5.6	6.8	+
				+	70.5	+	4.5	4.4	+
				+	55.4	-	4.7	6.9	+
				N/A	44.7	+	4.9	2.1	+
				+	70.1	+	8.4	3.3	+
				N/A	36.1	+	13.5	17.3	+

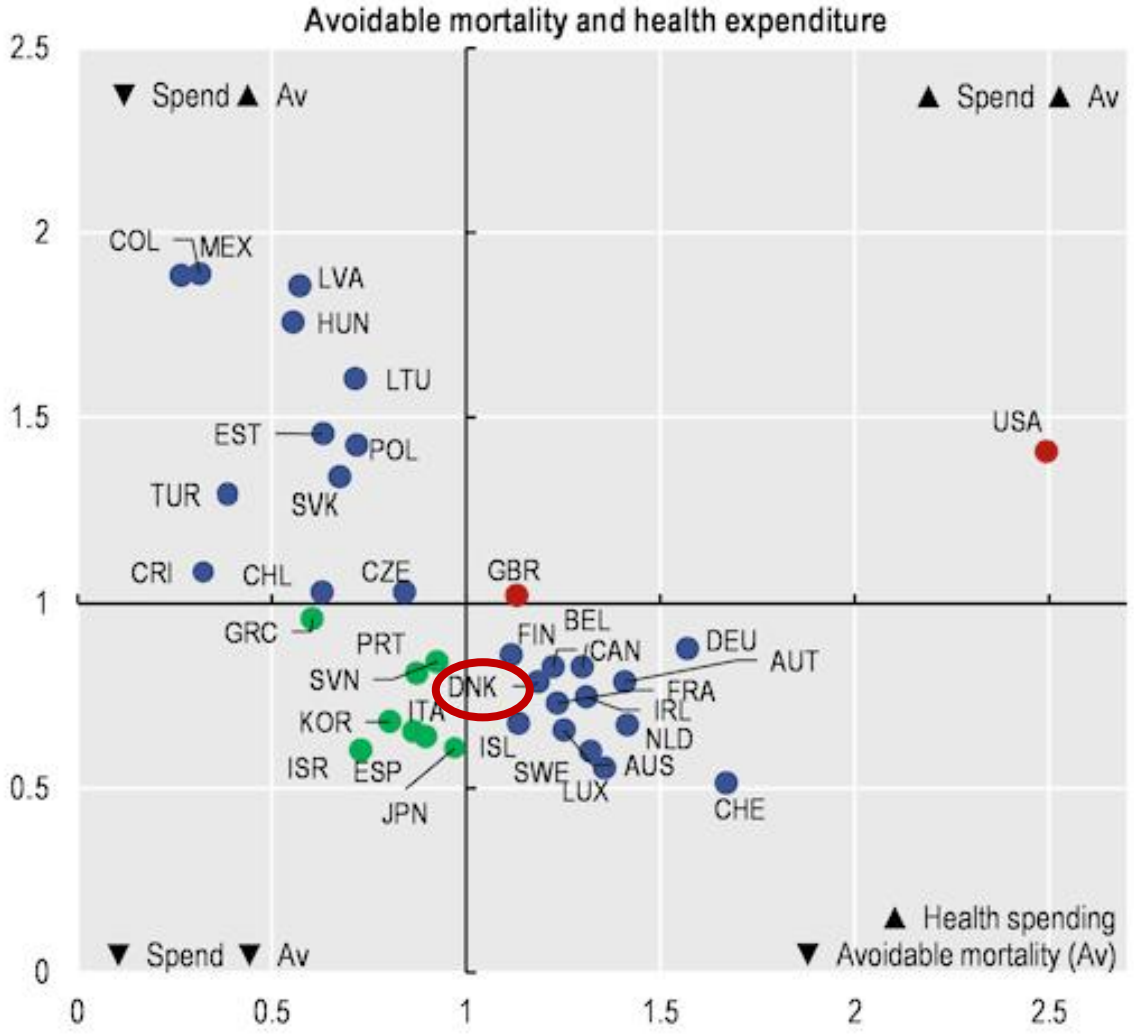


Note: Admission rates are not adjusted for differences in disease prevalence across countries. The data pertain to 2023 or latest available year.
Source: OECD Data Explorer (DF_HCQO).

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Association between health spending and health outcome indicators

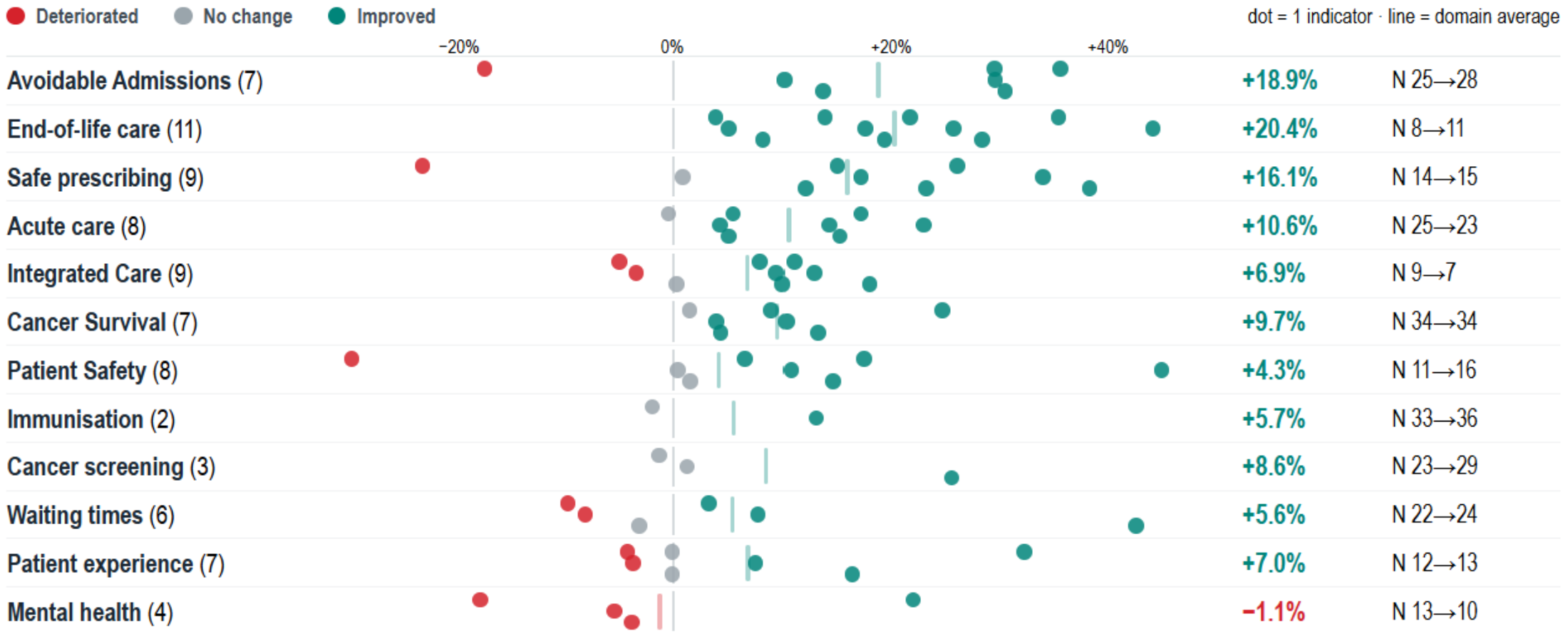




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What is being measured is (generally) getting better

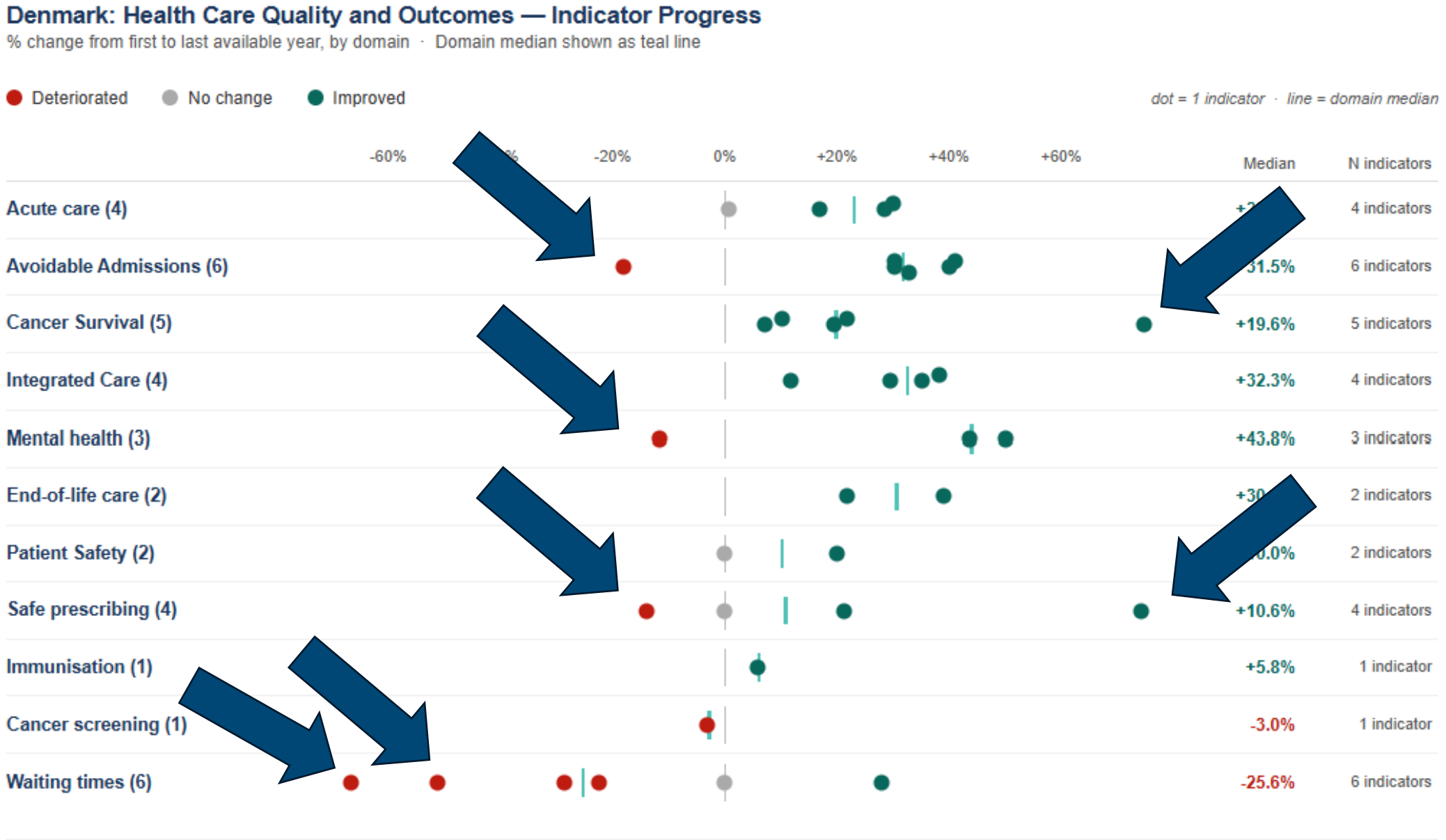
Trends in OECD Health Care Quality and Outcomes Indicators, 2013–2023



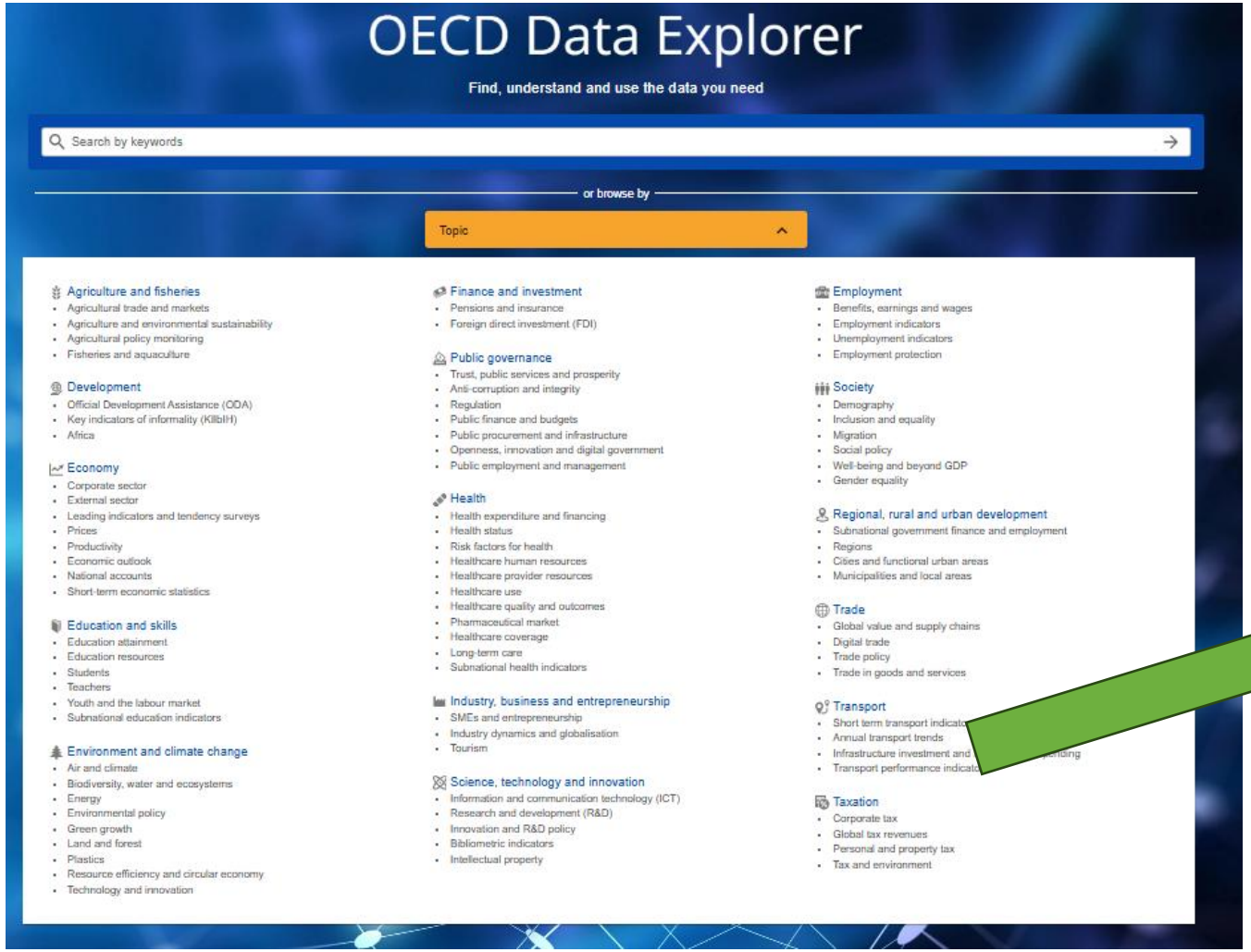
Note: N change indicates the average across included indicators; some indicators have low N. Most recent year to indicated date included.

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… and for Denmark



Source: OECD HCQO data, OECD Data Explorer (2025). % change = (last value − first value) / |first value| × 100, sign-adjusted so positive = improvement. Domains with <2 data points for Denmark excluded.



Health

- Health expenditure and financing
- Health status
- Risk factors for health
- Healthcare human resources
- Healthcare provider resources
- Healthcare use
- Healthcare quality and outcomes
- Pharmaceutical market
- Healthcare coverage
- Long-term care
- Subnational health indicators

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Key resources

- OECD Data Explorer
  - https://data-explorer.oecd.org/
- Health at a Glance 2025
  - https://www.oecd.org/en/publications/2025/11/health-at-a-glance-2025_a894f72e.html
- Delivering High Value Cancer Care:
  - https://www.oecd.org/en/publications/delivering-high-value-cancer-care_060869fe-en.html
- Does Healthcare Deliver?
  - https://www.oecd.org/en/publications/2025/02/does-healthcare-deliver_978507f1.html

Katherine de Bienassis
Senior Health Policy Analyst, Health Division
Directorate for Employment, Labour, and Social Affairs

katherine.DEBIENASSIS@oecd.org || www.oecd.org

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