

PRIVATE HOSPITALS

AUSTRALIA

EMBARGO: 11:30AM (CANBERRA TIME) WED 30 JUNE 1999

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 For further information about these and related statistics, contact Keith Carter on Brisbane
 07 3222 6374 or refer to any ABS office shown on the back cover of this publication.

NOTES

ABOUT THIS PUBLICATION

This publication presents details from the 1997–98 national census of private hospitals. Three categories of hospitals are identified: acute hospitals, psychiatric hospitals and free-standing day hospital facilities. There are relatively few psychiatric hospitals and some of these are owned by the same parent company. To maintain the confidentiality of their data, psychiatric hospitals are combined with acute hospitals in most tables in this publication.

For confidentiality reasons, also, the details for the two private acute hospitals in the Australian Capital Territory are included with the details for private acute and psychiatric hospitals in New South Wales and the details for the private acute hospital in the Northern Territory are included with such details for South Australian hospitals.

Any differences between the data given in this publication and the data shown in other reports on hospital activity are due to differences in scope and coverage, relative completeness of the data sources and differing error resolution procedures.

SYMBOLS AND OTHER USAGES

ABS Australian Bureau of Statistics

AIHW Australian Institute of Health and Welfare

AN-DRG Diagnosis Related Groups
n.p. not available for publication
— nil or rounded to zero

W. McLennan Australian Statistician

INTRODUCTION

Private hospitals are an important component of the total hospital industry in Australia. They continue to provide approximately a quarter of all days of hospitalisation and one-fifth of the recurrent expenditure by all (public and private) hospitals in Australia.

In 1997–98, expenditure incurred by private hospitals was \$3,757m. This represents 8% of the expenditure for the entire health sector in Australia and 0.7% of the gross domestic product.

OVERVIEW

Of the 492 private hospitals in operation during 1997–98, 294 were acute hospitals, 23 were psychiatric hospitals (table 3) and 175 were free-standing day hospital facilities (table 2). Generally, acute and psychiatric hospitals are combined throughout this publication (see Notes on page 2).

During 1997–98, private hospitals in Australia (tables 1 and 2):

- treated and discharged 1.9 million admitted patients (patient separations);
- provided 6.1 million days of care and treatment to these patients (patient days);
- performed 1.6 million surgical, obstetric and other procedures;
- employed nearly 43,000 staff;
- earned \$3,662m in income (revenue);
- spent \$3,354m for recurrent purposes (recurrent expenditure); and
- invested \$403m in buildings and other capital assets (capital expenditure).

Of the 1.9 million patient separations:

- one-third were aged 65 years and over;
- over half (56%) were females;
- nearly three-quarters (73%) had hospital insurance;
- almost half (47%) were overnight-stay patients, of which 51% were classed as surgery patients; and
- the most common principal diagnosis was diseases of the digestive system, accounting for 18% of separations.

HOSPITALS AND BEDS

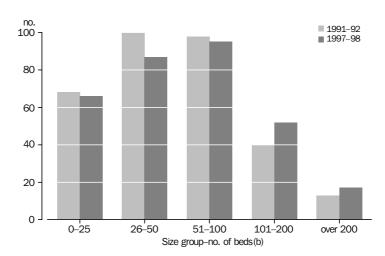
ACUTE AND PSYCHIATRIC HOSPITALS

Acute and psychiatric hospitals provide medical, surgical, obstetric, psychiatric and rehabilitative procedures and treatment for overnight-stay and same-day patients. The number of these hospitals fell from 319 in 1996–97 to 317 in 1997–98. This was the net effect of nine new hospitals which opened during 1997–98 and 11 hospitals which were in operation at sometime during 1996–97 but closed before 1997–98.

Over the seven years that the Australian Bureau of Statistics (ABS) has been collecting private hospitals data, the number of hospitals has not changed greatly. After rising from 319 in 1991–92 to 329 in 1993–94, they have declined each year since (table 1). The numbers of hospitals in most States and Territories have fluctuated very little over the seven-year period. The exception is Victoria, where hospitals decreased from 113 in 1993–94 to 97 in 1997–98 (table 1).

While the number of private hospitals in Australia has changed little over the seven years to 1997–98, the average number of beds available has increased by 11% (table1). This indicates a tendency towards larger hospitals as shown in the following graph. Over the seven-year period, hospitals with 26–50 beds declined by 14, mostly because of closures. In contrast, hospitals with 101–200 beds increased by 12, mainly because of new hospitals and the expansion of smaller existing hospitals.

HOSPITALS(a), By Size



- (a) Private acute and psychiatric hospitals.
- (b) Based on available beds (average for the year).

There has been a notable change in the ownership of private hospital beds since 1991–92. In that year, the majority (52%) of available beds were in hospitals owned by 'not for profit' organisations (see Hospital type in Glossary) but in 1997–98, the majority (53%) of beds were in hospitals designated as 'for profit' (table 4).

ACUTE AND PSYCHIATRIC HOSPITALS continued

In 1997–98, there were 1.23 private acute and psychiatric hospital beds available per 1,000 population. This rate ranged from 0.97 for New South Wales and the Australian Capital Territory combined, to 1.69 for Tasmania. In considering the relatively low rate for New South Wales, it should be recognised that services in New South Wales are substantially supplemented by large numbers of free-standing day hospital facilities (table 2). Most States have shown increases in bed rates in acute and psychiatric hospitals over the seven years to 1997–98. Notably, Tasmania and Western Australia increased by 44% and 23% respectively.

The availability of beds in areas outside Capital City Statistical Divisions has improved in recent years. For these areas, there were 0.9 beds per 1,000 population in 1997–98, an increase of 14% since 1991–92. In contrast, the rate for capital cities has increased only slightly, by 0.7% to 1.42.

FREE-STANDING DAY HOSPITAL FACILITIES

Free-standing day hospital facilities comprise general surgery, specialist endoscopy, ophthalmic and other (fertility management, plastic surgery and sleep disorders) clinics. Unlike acute and psychiatric hospitals, they do not provide overnight accommodation for patients. The number of free-standing day hospitals has more than doubled, from 72 in 1991–92 to 175 in 1997–98 (table 2). Conditions for the growth of these facilities have varied greatly between the States and Territories because of differing market forces and varying State and Territory legislation, set against a background of Commonwealth government initiatives to encourage the establishment of new facilities. Nearly half of these facilities are located in New South Wales (table 2), which has been responsible for 46% of the national growth in day hospitals since 1991–92.

There were also 164 day surgery theatres operating within acute and psychiatric hospitals in 1997–98 (table 8). Details for these are included with acute and psychiatric hospitals throughout this publication.

HOSPITAL USE

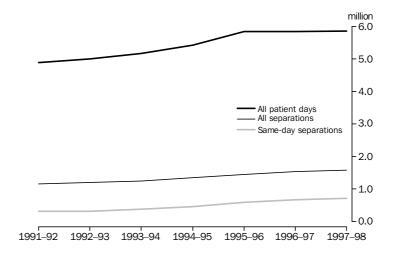
ACUTE AND PSYCHIATRIC HOSPITALS

There were 1,585,300 separations of patients from acute and psychiatric hospitals during 1997–98. This represents an increase of 3% on 1996–97. It is the smallest annual increase since this collection commenced in 1991–92. Previously, annual increases averaged 6%. A conspicuous feature has been the increasing proportion of same-day separations (i.e. patients who do not stay in hospital overnight) since 1992–93 (table 1). In that year, the proportion was 27% and reached 45% in 1997–98.

ACUTE AND PSYCHIATRIC HOSPITALS continued

The annual growth in days of hospitalisation has almost ceased. In 1997–98, patient days numbered 5,858, 800 (table 1), a small increase of 0.1% on the previous year. This continues the slowing down in growth between 1995–96 and 1996–97 when patient days increased by only 0.2%. This follows stronger growth, averaging 5%, between 1991–92 and 1995–96. Over the seven-year period to 1997–98, the proportion of days for same-day patients has risen from 6% to 12% (table 1). (A notional stay of one day is allocated to each patient who does not stay in hospital overnight.)

HOSPITALS(a), Patient Separations and Days



(a) Private acute and psychiatric hospitals.

The average length of stay by patients at acute and psychiatric hospitals has declined from 4.2 days in 1991–92 to 3.7 days in 1997–98 (table 1). This decline is partly caused by the increasing proportions of same-day patients. However, while there has been an overall decline in the average length of stay, the average time spent in hospital by overnight-stay patients has actually increased (table 1).

Higher bed occupancy rates indicate more complete usage of the services available at private acute and psychiatric hospitals. Over the seven years to 1997–98, these rates have increased from 64% to 70% (table 1). This change reflects a 20% increase in the number of patient days associated with an 11% increase in the number of beds. The relatively low increase in patient days over the last two years has stabilised the occupancy rates at 70%.

The introduction of changed counting methods for patient separations and days in 1995–96 and the implementation action taken by Queensland Health, impact on annual comparisons of patient days, average length of stay and occupancy rates (see Explanatory Notes, paragraphs 15–19).

FREE-STANDING DAY HOSPITAL FACILITIES

The number of patients treated at free-standing day hospital facilities has continued to grow strongly. In 1997–98, there were 271,700 separations, up 20% on 1996–97 (table 2). The number of separations from these facilities has more than doubled in the seven years since 1991–92, when there were 123,400 separations.

RECURRENT EXPENDITURE

ACUTE AND PSYCHIATRIC HOSPITALS

For private acute and psychiatric hospitals, the average recurrent expenditure per patient day in 1997–98 was \$552, an increase of 38% on the 1991–92 average (table 1). When costs are adjusted to remove the effects of price changes over the period, the increase is 26%. (See Explanatory Notes, paragraph 20, for the method used to derive chain volume measures.)

There is a strong correlation between average costs and hospital size. Larger hospitals provide proportionately more costly services involving complex procedures, expensive medical equipment and highly specialised staff than do smaller hospitals. In 1997–98, the average cost per patient day for hospitals with over 200 beds was \$663, compared with \$338 for hospitals with 25 or fewer beds (table 14). It should be noted that these costs include expenditure on services to non-admitted patients and it is the larger hospitals which tend to offer such services.

There is considerable variation in the average recurrent expenditure per patient day across the States. In 1997–98, this average ranged from \$478 for South Australia and Northern Territory combined, to \$622 for Tasmania (table 12). These figures reflect the differing sizes (and casemixes) of the hospitals in the various States.

Total recurrent expenditure for all private acute and psychiatric hospitals in Australia during 1997–98 was \$3,231.5m (table 1). This represents an increase of 5% since the previous year and an increase of 65% over the seven years to 1997–98 (or 3% and 51%, when adjusted to remove the effects of price change). Smaller annual increases in recurrent expenditure were experienced in the latest two years consistent with the smaller increases recorded for total patient days in those years.

The largest component of recurrent expenditure is wages and salaries (including on-costs such as employer contributions to superannuation and payroll tax). In 1997–98 this accounted for 59% of total recurrent expenditure (table 14). Other large components were drug, medical and surgical supplies (14% of total) and administrative expenses (8%). After adjustment to remove the effects of price change, expenditure on most components has grown by 30–50% over the seven years to 1997–98. However, expenditure on the drug, medical and surgical supplies component has more than doubled (115%). Other domestic services (including staff services, bedding, linen, crockery, cutlery, fuel, light and power) increased by 8%, substantially less than for all other components.

FREE-STANDING DAY HOSPITAL FACILITIES

The average recurrent expenditure per patient separation for free-standing day hospital facilities was \$450 in 1997–98, up by 57% on the corresponding figure for 1991–92. When adjusted to remove the effects of price change, this increase is 43%. Ophthalmic clinics continue to have the highest average recurrent expenditure per separation (\$951) and specialist endoscopy centres continue to have the lowest (\$255) (table 25).

Recurrent expenditure for all free-standing day hospital facilities during 1997–98 was \$122.3m. This is an increase of 246% on the figure for 1991–92 (or 216% after adjustment to remove the effects of price change) (table 2).

CAPITAL EXPENDITURE

ACUTE AND PSYCHIATRIC HOSPITALS

Capital expenditure by private acute and psychiatric hospitals during 1997–98 was \$376.4m (table 1), of which 62% was for land and buildings. This expenditure is equivalent to 11% of the total revenue earned in that year. Over the seven years to 1997–98, the proportion of capital expenditure to revenue has averaged 12%. Note that capital expenditure includes expenditure on existing capital items (e.g. when a hospital is purchased by new owners) as well as new capital items.

FREE-STANDING DAY HOSPITAL FACILITIES

During 1997–98, free-standing day hospital facilities spent \$27.0m on capital items (table 2), equivalent to 19% of revenue received. This proportion has averaged 20% over the seven years to 1997–98.

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29	, e
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3	
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	1991–92	1992-93	1993–94	1994–95	1995–96	1996–97	1997–98
•••••	• • • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • •
Hospitals (no.)							
New South Wales	90	90	91	92	91	87	89
Victoria	111	113	113	111	104	101	97
Queensland	49	49	51	52	50	50	51
South Australia	37	39	38	39	42	41	40
Western Australia	21	21	24	22	23	27	26
Tasmania	8	8	9	9	10	10	11
Northern Territory	1	1	1	1	1	1	1
Australian Capital Territory	2	2	2	2	2	2	2
Australia	319	323	329	328	323	319	317
Beds(a) (no.)							
Capital City Statistical Dvisions	15 690	15 663	15 809	16 632	16 821	17 014	16 968
Rest of Australia	5 055	5 197	5 432	5 738	5 936	5 952	6 123
Total	20 745	20 860	21 241	22 370	22 757	22 966	23 091
Congretions (1000)							
Separations ('000)	244.4	242.4	200.0	405.4	507.4	675.0	740.0
Same-day patients	311.4	313.4	380.6	465.1	597.1	675.9	713.0
Overnight-stay patients Total	845.8	888.8 1 202.2	870.1	881.6	855.2	863.5	872.3
iotai	1 157.2	1 202.2	1 250.7	1 346.7	1 452.3	1 539.4	1 585.3
Patient days ('000)							
Same-day patients	311.4	313.4	380.6	465.1	597.1	675.9	713.0
Overnight-stay patients	4 579.9	4 692.9	4 791.8	4 956.8	5 247.1	5 177.7	5 145.8
Total	4 891.3	5 006.3	5 172.4	5 421.9	5 844.2	5 853.6	5 858.8
A constant and the office of the office of							
Average length of stay (days)							
Overnight-stay patients	5.4	5.3	5.5	5.6	6.1	6.0	5.9
All patients	4.2	4.2	4.1	4.0	4.0	3.8	3.7
Occupancy rate (%)							
Overnight-stay patients	60.3	61.6	61.8	60.7	63.2	61.8	61.1
All patients	64.4	65.8	66.7	66.4	70.4	69.8	69.5
Staff(b) (no.)	31 097.2	32 492.6	33 757.6	36 588.6	39 099.9	40 907.5	41 565.6
Stanto, (no.)	31 091.2	32 492.0	33 131.0	30 366.0	39 099.9	40 907.5	41 303.0
Revenue							
Total (\$'000)	2 177 035	2 325 497	2 491 674	2 763 174	3 083 859	3 374 271	3 517 030
Patient revenue(c) (%)	95.3	95.7	95.1	94.7	94.3	93.7	92.4
Recurrent expenditure							
Total (\$'000)	1 954 646	2 049 427	2 225 893	2 503 067	2 823 781	3 087 710	3 231 530
Wages & salaries, including on-costs(d) (%)	60.8	61.3	60.3	59.1	58.7	59.2	58.8
Per patient day (\$)	400	409	430	462	483	527	552
r or padoric day (ψ)	400	409	430	+02	+00	521	552
Gross capital expenditure (\$'000)	212 331	258 563	369 474	354 211	381 853	307 159	376 415

⁽a) Available beds (average for the year).

⁽b) Full-time equivalent (average for the year).

⁽c) As a proportion of total revenue.

⁽d) As a proportion of total recurrent expenditure.

	1991–92	1992–93	1993–94	1994–95	1995–96	1996–97	1997–98
• • • • • • • • • • • • • • • • • • • •	• • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • •
Hospitals (no.)							
New South Wales	37	57	63	71	73	81	84
Victoria	22	23	24	23	23	22	30
Queensland	4	5	9	11	17	21	26
South Australia	1	1	3	7	10	12	14
Western Australia	4	4	7	8	10	9	12
Tasmania	_	_	1	1	2	3	3
Northern Territory	_	_	_	_	_	_	_
Australian Capital Territory	4	4	4	4	5	5	6
Australia	72	94	111	125	140	153	175
Hospitals by type (no.)							
General surgery	24	37	46	47	54	57	55
Specialist endoscopy	26	29	30	36	37	37	42
Ophthalmic	13	14	16	20	23	25	29
Other(a)	9	14	19	22	26	34	49
Total	72	94	111	125	140	153	175
Bed/chairs(b) (no.)	556	763	917	939	1 023	1 163	1 348
Separations ('000)	123.4	149.4	182.2	189.9	208.8	226.3	271.7
Operating theatres at 30 June (no.)	61	90	111	122	139	158	175
Procedure rooms at 30 June (no.)	69	90	103	108	130	134	148
Staff(c) (no.)	429.4	543.4	653.1	755.0	889.7	1 010.6	1 219.7
Revenue							
Total (\$'000)	45 486	60 825	76 502	85 805	99 305	119 215	145 278
Patient revenue(d) (%)	90.0	96.1	94.2	96.4	94.8	94.7	95.7
r ddorre rosonae (a) (70)	00.0	00.1	02	0011	00	· · · ·	00
Recurrent expenditure							
Total (\$'000)	35 360	48 916	61 092	70 044	80 238	95 410	122 311
Wages and salaries, including on-costs(e) (%)	41.1	40.0	39.7	40.9	42.8	40.1	41.7
Cost per separation (\$)	287	327	335	369	384	422	450
Gross capital expenditure (\$'000)	6 052	18 888	15 317	16 717	16 775	21 017	26 967

⁽a) Clinics specialising in fertility management, plastic surgery and sleep disorders.

⁽b) Available beds/chairs (average for the year).

⁽c) Full-time equivalent (average for the year).

⁽d) As a proportion of total revenue.

⁽e) As a proportion of total recurrent expenditure.

	NSW and ACT	Vic.	Qld	SA and NT	WA	Tas.	Aust.			
• • • • • • • • • • • • • • • • • • • •		• • • • • • • •								
HOSPITALS										
Type										
Acute	82	92	48	38	24	10	294			
Psychiatric	9	5	3	3	2	1	23			
Total	91	97	51	41	26	11	317			
Location										
Capital City Statistical Divisions	62	68	20	31	23	5	209			
Rest of Australia	29	29	31	10	3	6	108			
Hospital size(a)										
0–25 beds	5	26	10	15	6	4	66			
26-50 beds	34	31	5	12	4	1	87			
51-100 beds	37	22	16	8	9	3	95			
101-200 beds	12	13	15	5	4	3	52			
Over 200 beds	3	5	5	1	3	_	17			
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • •	• • • • • • • •	• • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • •	• • • • • •			
		BEDS	6							
Available beds(b)										
Acute hospitals	6 000	5 826	4 783	n.p.	n.p.	n.p.	21 747			
Psychiatric hospitals	476	307	225	n.p.	n.p.	n.p.	1 344			
Total	6 476	6 133	5 008	2 269	2 409	796	23 091			
Location										
Capital City Statistical Divisions	4 547	5 125	2 520	2 105	n.p.	n.p.	16 968			
Rest of Australia	1 929	1 008	2 488	164	n.p.	n.p.	6 123			
Approved beds(b)	6 683	6 403	5 384	2 425	2 716	892	24 503			
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	• • • • • • • •	• • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • •	• • • • • •			
	PROPORT	TON OF AUS	STRALIAN	TOTAL						
	%	%	%	%	%	%	%			
Hospitals	28.7	30.6	16.1	12.9	8.2	3.5	100.0			
Available beds(b)	28.1	26.6	21.7	9.8	10.4	3.5	100.0			

⁽a) Based on available beds (average for the year).

⁽b) Average for the year.

NOT FOR PROFIT.....

	For profit	Religious or charitable	Other(a)	Total					
• • • • • • • • • • • • • • • • • • • •									
HOSPITALS									
New South Wales and									
Australian Capital Territory	69	19	3	91					
Victoria	52	17	28	97					
Queensland	21	22	8	51					
South Australia and									
Northern Territory	17	5	19	41					
Western Australia	16	9	1	26					
Tasmania	5	3	3	11					
Australia	180	75	62	317					
Location									
Capital City Statistical Divisions	139	48	22	209					
Rest of Australia	41	27	40	108					
Hospital size(b)									
0–25 beds	22	10	34	66					
26-50 beds	63	10	14	87					
51-100 beds	63	21	11	95					
101-200 beds	27	23	2	52					
Over 200 beds	5	11	1	17					
Total	180	75	62	317					
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	• • • • • • • • • • •	• • • • • • • • • •	• • • • • • • • •					
	BED)S							
Available beds(c)									
Capital City Statistical Divisions	9 259	6 321	1 388	16 968					
Rest of Australia	2 923	2 308	892	6 123					
Total	12 182	8 629	2 280	23 091					
Approved beds(c)	12 847	9 282	2 374	24 503					

⁽a) Comprising bush nursing, community and memorial hospitals.

⁽b) Based on available beds (average for the year).

⁽c) Average for the year.

	Separations		Patient days(a)		Average length of stay	Bed occupancy rate
	'000	%	'000	%	days	%
• • • • • • • • • • • • • • • • • • • •	• • • • • • • •	• • • • • • •			• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • •
Now Couth Wales and			1995–96			
New South Wales and Australian Capital Territory	396.6	27.3	1 476.7	25.3	3.7	63.7
Victoria	389.9	26.8	1 603.9	27.4	4.1	71.4
Queensland	332.2	22.9	1 465.7	25.1	4.4	80.9
South Australia and						
Northern Territory	139.9	9.6	573.9	9.8	4.1	65.7
Western Australia	141.5	9.7	532.0	9.1	3.8	67.9
Tasmania	52.1	3.6	192.1	3.3	3.7	70.0
Australia	1 452.3	100.0	5 844.2	100.0	4.0	70.4
Location						
Capital City Statistical						
Divisions	1088.3	74.9	4409.0	75.4	4.1	71.8
Rest of Australia	364.0	25.1	1 435.2	24.6	3.9	66.2
•••••	• • • • • • • •			• • • • • • •	• • • • • • • • • • • • •	• • • • • • • • • • •
Navy Cavitle Wales and			1996–97			
New South Wales and Australian Capital Territory	429.0	27.9	1 557.4	26.6	3.6	66.9
Victoria	429.0	27.9	1 631.5	27.9	3.9	72.6
Queensland	340.9	22.1	1 345.0	23.0	3.9	73.4
South Australia and	0.10.0	22.1	10.0.0	20.0	0.0	70.1
Northern Territory	144.8	9.4	578.8	9.9	4.0	67.0
Western Australia	154.2	10.0	536.8	9.2	3.5	65.0
Tasmania	53.9	3.5	204.0	3.5	3.8	71.6
Australia	1 539.4	100	5 853.6	100	3.8	69.8
Location						
Capital City Statistical						
Divisions	1 164.4	75.6	4 407.0	75.3	3.8	71.0
Rest of Australia	375.0	24.4	1 446.6	24.7	3.9	66.6
•••••	• • • • • • • •	• • • • • • •	• • • • • • • • • • • • •	• • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • •
			1997–98			
New South Wales and		95.	,	o= -		
Australian Capital Territory	445.6	28.1	1 592.1	27.2	3.6	67.4
Victoria Queensland	437.8 339.0	27.6 21.4	1 628.9 1 338.3	27.8 22.8	3.7 4.0	72.8 73.2
South Australia and	339.0	21.4	1 336.3	22.0	4.0	13.2
Northern Territory	146.5	9.2	559.7	9.6	3.8	67.6
Western Australia	165.2	10.4	551.3	9.4	3.3	62.7
Tasmania	51.1	3.2	188.5	3.2	3.7	64.9
Australia	1 585.3	100.0	5 858.8	100.0	3.7	69.5
Location Capital City Statistical						
Divisions	1 185.3	74.8	4 373.3	74.6	3.7	70.6
Rest of Australia	400.0	25.2	1 485.6	25.4	3.7	66.5

⁽a) See Explanatory Notes, paragraphs 15–19.

	Separations.		Patient day	S	Average length of stay	Bed occupancy rate
Hospital type	'000	%	'000	%	days	%
• • • • • • • • • • • • • • • • • • • •	• • • • • • •	• • • • • • •	• • • • • • • • •	• • • • • •	• • • • • • • • • • • • •	• • • • • • • • • •
For profit	822.8	51.9	2 995.9	51.1	3.6	67.4
Not for profit						
Religious or charitable	626.1	39.5	2 330.2	39.8	3.7	74.0
Other(a)	136.3	8.6	532.8	9.1	3.9	64.0
Total	1 585.3	100.0	5 858.8	100.0	3.7	69.5

⁽a) Comprising bush nursing, community and memorial hospitals.

PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Separations, Days, Average Stay & Occupancy

	Separations		Patient days.		Average length of stay	Bed occupancy rate
Hospital size(a)	'000	%	'000	%	days	%
• • • • • • • • • • • • • • • • • • • •	• • • • • • • •	• • • • • •	• • • • • • • • • •	• • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •
0-25 beds	43.1	2.7	191.2	3.3	4.4	60.1
26-50 beds	186.4	11.8	710.4	12.1	3.8	58.2
51–100 beds	436.1	27.5	1 561.3	26.7	3.6	61.9
101-200 beds	572.8	36.1	1 985.7	33.9	3.5	74.0
Over 200 beds	347.0	21.9	1 410.2	24.1	4.1	83.7
Total	1 585.3	100.0	5 858.8	100.0	3.7	69.5

⁽a) Based on available beds (average for the year).

Theatres	NSW and ACT	Vic.	Qld	SA and NT	WA	Tas.	Aust.
• • • • • • • • • • • • • • • • • • • •		• • • • • • • •	• • • • • • •	• • • • • • • •	• • • • • • •	• • • • • • •	
Operating theatres							
Hospitals with these theatres	66	65	36	21	21	7	216
Theatres	234	181	143	72	86	25	741
Average number of sessions(b)	8.4	7.7	8.2	7.3	7.1	5.3	7.8
Average theatre time used (b)(hours)	27.7	26.4	29.6	26.2	22.4	17.4	26.7
Nurses(c)	1 346.5	1 137.5	845.5	424.6	490.7	139.9	4 384.7
Day surgery theatres(d)							
Hospitals with these theatres	23	34	26	6	12	5	106
Theatres	28	60	42	8	20	6	164
Average number of sessions(b)	4.5	4.7	5.9	8.0	5.9	4.5	5.3
Average theatre time used (b)(hours)	12.4	11.6	11.1	17.8	16.9	6.6	12.4
Nurses(c)	(e)52.9	183.7	110.8	24.5	87.1	11.9	470.9

⁽a) Details for last week of pay period before 30 June.

9

PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Specialised Wards & Units

	Labour wards	Psychiatric wards(a)	Special care units(b)	Accident or emergency units	
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	• • • • • • • • • •	• • • • • • • • •	• • • • • • • • •	
Hospitals with specialised wards or units					
New South Wales and					
Australian Capital Territory	23	13	40	6	
Victoria	30	11	39	11	
Queensland	19	9	25	9	
South Australia and					
Northern Territory	13	3	13	4	
Western Australia	12	6	12	2	
Tasmania	3	1	7	4	
Australia	100	43	136	36	
Beds—last Wednesday in June	375	1 650	1 410	282	
Nurses(c)—last pay period in June	1 120	931	1 945	393	

⁽a) Including alcohol and drug rehabilitation or treatment units.

⁽b) Per theatre per week.

⁽c) Full-time equivalent.

⁽d) Excluding free-standing day hospital facilities.

⁽e) Care should be exercised when making comparisons as 1996–97 data have been revised.

⁽b) Intensive care units, coronary care units, neonatal intensive care units and high dependency units.

⁽c) Full-time equivalent.

	NSW and ACT	Vic.	Qld	SA and NT	WA	Tas.	Aust.		
NUMBER OF STAFF									
Nursing staff	6 894.8	6 696.7	5 434.1	2 248.0	2 381.8	911.2	24 566.6		
Registered	5 661.5	6 145.9	4 601.3	1 836.1	2 100.2	785.6	21 130.5		
Other	1 233.3	550.8	832.8	411.9	281.6	125.6	3 436.1		
Salaried medical officers and other									
diagnostic health professionals	600.6	847.7	246.2	71.4	179.1	110.3	2 055.2		
Administrative and clerical	1 439.1	1 412.1	1 257.2	449.4	666.2	195.3	5 419.2		
Domestic and other staff	2 561.6	2 628.8	2 143.0	628.2	1 218.5	344.6	9 524.6		
Domosto ana sener stan	2 302.0	2 020.0	2 1 .0.0	020.2	1 210.0	00	0 02		
Total	11 496.0	11 585.3	9 080.5	3 396.9	4 445.6	1 561.4	41 565.6		
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • •								
AV	/ERAGE NUMBE	R OF STAF	F PER OCCU	JPIED BED					
Nursing staff	1.6	1.5	1.5	1.5	1.6	1.8	1.5		
Registered	1.3	1.4	1.3	1.2	1.4	1.5	1.3		
Other	0.3	0.1	0.2	0.3	0.2	0.2	0.2		
	0.0	0.2	0.2	0.0	0.2	5.2	0.2		
Other	1.1	1.1	1.0	0.8	1.4	1.3	1.1		
Total	2.6	2.6	2.5	2.2	3.0	3.0	2.6		

⁽a) Full-time equivalent.

PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Revenue

	NSW and ACT	Vic.	Qld	SA and NT	WA	Tas.	Aust.
• • • • • • • • • • • • • • • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • •	• • • • • • •	• • • • • • •	• • • • • •	
Revenue (\$'000)							
Patient revenue	949 897	932 424	683 814	258 906	309 997	113 578	3 248 614
Recoveries	58 445	51 319	24 227	14 292	20 688	6 393	175 363
Other(a)	29 125	24 969	20 427	3 853	13 767	911	93 053
Total	1 037 467	1 008 711	728 467	277 051	344 451	120 881	3 517 030
Patient revenue as a proportion of							
total revenue (%)	91.6	92.4	93.9	93.5	90.0	94.0	92.4

⁽a) Investment income, income from charities, bequests, visitors' meals and accommodation and kiosk sales.

	NSW and ACT	Vic.	Qld	SA and NT	WA	Tas.	Aust.
• • • • • • • • • • • • • • • • • • • •		• • • • • • •	• • • • • • •		• • • • • • •	• • • • • • •	• • • • • •
Recurrent expenditure(a) (\$'000)							
Wages and salaries including on-costs	533 208	544 017	403 034	158 056	187 812	73 671	1 899 799
Drug, medical and surgical supplies	153 030	120 956	77 777	33 818	43 237	13 206	442 024
Food supplies	19 462	21 927	14 465	4 916	6 807	2 387	69 964
Other domestic services	20 011	16 199	16 116	5 300	8 069	3 021	68 717
Administrative expenses	78 685	84 288	52 021	21 284	23 842	9 719	269 839
Repairs and maintenance	19 665	19 399	14 344	4 678	5 120	1 787	64 992
Other(b)	125 907	121 066	75 130	39 202	41 485	13 407	416 196
Total	949 968	927 852	652 887	267 254	316 371	117 198	3 231 530
Wages and salaries including on-costs as a							
proportion of total recurrent expenditure (%)	56.1	58.6	61.7	59.1	59.4	62.9	58.8
Average recurrent expenditure(c)							
Per separation (\$)	2 132	2 119	1 926	1 824	1 915	2 292	2 039
Per patient day (\$)	597	570	488	478	574	622	552
Gross capital expenditure (\$'000)	153 495	57 265	65 659	27 358	64 129	8 509	376 415

⁽a) See Explanatory Notes, paragraph 11. Expenditure on non-admitted patient services is included by default because such expenditure is not separately available.

⁽b) Interest, depreciation and contract services.

⁽c) Average expenditure figures can vary considerably between hospitals depending on the type of services they provide.

NOT FOR PROFIT.....

		Religious or		
	For profit	charitable	Other(a)	Total
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • •	• • • • • • • • • • • •	• • • • • • • • • • •	• • • • • • • • • • • •
Recurrent expenditure(b) (\$'000)				
Wages and salaries including on-costs	886 743	860 618	152 439	1 899 799
Drug, medical and surgical supplies	208 916	201 197	31 911	442 024
Food supplies	32 320	31 583	6 061	69 964
Other domestic services	32 836	30 385	5 496	68 717
Administrative expenses	120 918	130 760	18 161	269 839
Repairs and maintenance	28 787	30 678	5 527	64 992
Other(c)	173 522	206 938	35 736	416 196
Total	1 484 041	1 492 159	255 330	3 231 530
Wages and salaries including on-costs as a proportion of total recurrent expenditure (%)				
	59.8	57.7	59.7	58.8
Average expenditure(d) (\$)				
Per separation	1 804	2 383	1 873	2 039
Per patient day	495	640	479	552
Gross capital expenditure (\$'000)	198 969	142 471	34 975	376 415

⁽a) Bush nursing, community and memorial hospitals.

⁽b) See Explanatory Notes, paragraph 11. Expenditure on non-admitted patient services is included by default because such expenditure is not separately available.

⁽c) Interest, depreciation and contract services.

 $[\]hbox{ (d) Average expenditure figures can vary considerably between hospitals depending on the type } \\$ of services they provide.

HOSPITALS WITH BEDS NUMBERING.....

	0–25	26–50	51–100	101–200	Over 200	Total
•••••	• • • • • • •			• • • • • • • • •	• • • • • • • • •	• • • • • • • •
Recurrent expenditure(b) (\$'000)						
Wages and salaries including on-costs	41 513	185 557	462 547	663 348	546 834	1 899 799
Drug, medical and surgical supplies	4 056	34 423	106 587	164 037	132 922	442 024
Food supplies	1 730	7 557	17 345	22 475	20 857	69 964
Other domestic services	1 741	7 641	17 724	22 360	19 252	68 717
Administrative expenses	6 400	30 418	67 661	96 567	68 793	269 839
Repairs and maintenance	1 318	6 630	15 425	20 472	21 147	64 992
Other(c)	7 849	39 944	98 929	144 151	125 324	416 196
Total	64 606	312 169	786 218	1 133 409	935 128	3 231 530
Wages and salaries including on-costs as a						
proportion of total recurrent expenditure (%)	64.3	59.4	58.8	58.5	58.5	58.8
Average recurrent expenditure(d) (\$)						
Per separation	1 501	1 675	1 803	1 979	2 695	2 039
Per patient day	338	439	504	571	663	552
Gross capital expenditure (\$'000)	5 812	34 808	61 227	195 804	78 764	376 415

⁽a) Based on number of available beds (average for the year).

⁽b) See Explanatory Notes, paragraph 11. Expenditure on non-admitted patient services is included by default because such expenditure is not separately available.

⁽c) Interest, depreciation and contract services.

⁽d) Average expenditure figures can vary considerably between hospitals depending on the type of services they provide.

	Hospitals(a)	Separations	Patient days(b)	Average length of stay
	no.	'000	'000	days
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	• • • • • • • • •	• • • • • • • • • •	• • • • • • • •
Same-day patients(c)	285	713.0	713.0	1.0
Overnight-stay patients				
Advanced surgery	212	131.2	895.7	6.8
Surgery	228	314.4	1 027.2	3.3
Obstetrics	119	62.8	371.2	5.9
Psychiatric	40	20.3	377.8	18.6
Rehabilitation	37	13.7	291.9	21.3
Nursing home type	59	1.2	138.3	114.6
Medical and other(d)	285	328.6	2 043.7	6.2
All overnight-stay patients	316	872.3	5 145.8	5.9
Total	317	1 585.3	5 858.8	3.7

⁽a) Most hospitals treat more than one class of patient and so are counted in more than one row.

PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Average Stay (Days)—Patient Classification

	NSW and ACT	Vic.	Qld	SA and NT	WA	Tas.	Aust.
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • •	• • • • • • • •	• • • • • •	• • • • • • • •	• • • • • • • • •	• • • • • • • • •	• • • • • •
Same-day patients(a)	1.0	1.0	1.0	1.0	1.0	1.0	1.0
Overnight-stay patients							
Advanced surgery	6.2	7.3	7.5	6.6	6.6	7.2	6.8
Surgery	3.1	3.4	3.4	3.3	3.1	3.8	3.3
Obstetrics	6.0	6.1	5.9	5.7	5.8	5.2	5.9
Psychiatric	20.1	18.8	17.3	n.p.	n.p.	n.p.	18.6
Rehabilitation	20.0	21.6	28.4	n.p.	_	n.p.	21.3
Nursing home type(b)	37.7	219.7	113.3	n.p.	n.p.	n.p.	114.6
Medical and other(c)	6.6	6.3	6.0	5.9	6.3	5.7	6.2
All overnight-stay patients	5.8	6.3	6.1	5.7	5.2	5.5	5.9
All patients	3.6	3.7	4.0	3.8	3.3	3.7	3.7

⁽a) Allocated a notional stay of one day. Patient classification for same-day patients has been discontinued.

⁽b) Each same-day patient is allocated a notional stay of one day.

⁽c) Patient classification for same-day patients has been discontinued.

⁽d) Includes minor surgery which, prior to 1996–97, was included in the category, Surgery and minor surgery. Also includes other surgery not covered by the Medicare Benefits Schedule, e.g. cosmetic surgery.

⁽b) See Explanatory Notes, paragraphs 15–19.

⁽c) Includes minor surgery which, prior to 1996-97, was included in the category, Surgery and minor surgery. Also includes other surgery not covered by the Medicare Benefits Schedule, e.g. cosmetic surgery.

HOSPITALS WITH BEDS NUMBERING.....

Patient classification	0–25	26–50	51–100	101–200	Over 200	Total
• • • • • • • • • • • • • • • • • • • •	• • • • • •	• • • • • • •	• • • • • • •	• • • • • • •	• • • • • •	• • • • •
Same-day patients(b)	1.0	1.0	1.0	1.0	1.0	1.0
Overnight-stay patients						
Advanced surgery	4.7	4.0	5.9	7.2	8.2	6.8
Surgery	3.2	2.5	2.9	3.3	3.9	3.3
Obstetrics	4.9	5.4	6.0	6.0	5.9	5.9
Psychiatric	n.p.	18.2	19.7	n.p.	n.p.	18.6
Rehabilitation	n.p.	21.2	19.9	n.p.	n.p.	21.3
Nursing home type	n.p.	104.1	29.0	n.p.	61.1	114.6
Medical and other(c)	8.4	8.1	6.4	5.1	7.0	6.2
All overnight-stay patients	11.0	6.7	5.8	5.3	6.2	5.9
All patients	4.4	3.8	3.6	3.5	4.1	3.7

⁽a) Based on number of available beds (average for the year).

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PRIVATE ACUTE & PSYCHIATRIC HOSPITALS, Type of Procedure

	Hospitals	Procedure	es
	no.(a)		no. %
• • • • • • • • • • • • • • • • • • • •	• • • • • • •	• • • • • • • • •	• • • • • • • • • • •
Advanced surgery	215	178 3	390 14.0
Surgery	229	666 4	165 52.2
Minor/other surgery(b)	204	370 2	241 29.0
Obstetrics	119	62 1	.83 4.9
Total	317	1 277 2	279 100.0

⁽a) Most hospitals provide more than one type of procedure and so are counted in more than one row.

⁽b) Allocated a notional stay of one day. Patient classification for same-day patients has been discontinued.

⁽c) Includes minor surgery which, prior to 1996–97, was included in the category, Surgery and minor surgery. Also includes other surgery not covered by the Medicare Benefits Schedule, e.g. cosmetic surgery.

⁽b) All other surgery, including surgery not covered by the Medicare Benefits Schedule, e.g. cosmetic surgery.

'000 '000 119.1 23.7	'000 1 203.1
119.1 23.7	
	1 203 1
24.3 165.2 51.1	349.8 32.4 1 585.3
% %	%
72.1 46.3 27.9 6.2 — 47.5	75.9 22.1 2.0 100.0
• • • • • • • • • • • • • • • • • • • •	100.0
days days	days
3.3 3.5 3.5 3.1 — 3.9 3.3 3.7	3.8 3.4 3.7 3.7
• - /	46.1 3.2 24.3 165.2 51.1 % % 72.1 46.3 27.9 6.2 47.5 100.0 100.0 FAY days days 3.3 3.5 3.1 3.9

	NSW and ACT	Vic.	Qld	SA and NT	WA	Tas.	Aust.
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	• • • • • • •	• • • • • • •	• • • • • • •	• • • • • • • •	• • • • • • •	• • • • • •
Neonatal intensive care unit	16	16	16	4	6	2	60
Separate intensive care unit (ICU)	12	6	6	5	1	_	30
Separate coronary care unit (CCU)	8	7	2	3	1	_	21
Combined ICU/CCU	11	6	9	_	4	3	33
High dependency unit	19	32	9	12	6	5	83
Obstetric/maternity service	26	28	20	11	10	4	99
Specialist paediatric service	4	6	11	_	2	1	24
Cardiac surgery unit	6	4	4	1	_	_	15
Neurosurgical unit	3	3	1	_	_	_	7
Acute spinal cord injury unit	_	_	_	_	_	_	_
Burns unit	_	_	_	_	_	_	_
Major plastic/reconstructive surgery unit	_	1	1	_	_	_	2
Transplantation units	_	_	1	_	_	_	1
Acute renal dialysis unit	_	3	3	_	_	_	6
Maintenance renal dialysis centre	2	4	1	2	1	_	10
Infectious diseases unit	_	_	1	_	_	_	1
Psychiatric unit/ward(a)	12	8	8	3	7	1	39
Oncology unit	6	16	8	2	3	1	36
Rehabilitation unit(a)	15	12	6	2	_	2	37
Refractory epilepsy unit	1	_	1	_	_	_	2
Clinical genetics unit	_	_	_	_	_	_	_
Sleep centre	12	11	9	1	2	1	36
AIDS unit	_	_	_	_	_	_	_
Diabetes unit	_	_	_	_	_	_	_
In-vitro fertilisation unit	3	_	2	_	1	1	7
Alcohol and drug unit	5	5	1	1	1	_	13
Nursing home care unit(b)	_	3	_	3	_	_	6
Geriatric assessment unit	_	1	1	2	_	_	4
Domiciliary care service	1	5	1	1	1	2	11
Hospice/palliative care unit	1	1	2	1	4	1	10
Dedicated day surgery unit	29	30	20	9	10	4	102
Other specialised services	1	1	5	1	2	_	10
All hospitals(c)	76	67	37	26	24	9	239

⁽a) Designated as such by registered health benefits funds.

⁽b) Including those which are an integral part of the hospital only.

⁽c) Many hospitals have more than one type of specialised unit or ward and so are counted in more than one row.

HOSPITALS	

	NSW and ACT	Vic.	Qld	SA and NT	WA	Tas.	Aust.	Occasions of service
Designated units or wards	no.	no.	no.	no.	no.	no.	no.	'000
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • •	• • • • • • •	• • • • • • • •	• • • • • • •	• • • • • • •	• • • • • • •	• • • • • •	• • • • • • • • • • • • • • • • • • • •
Accident and emergency(a)	7	24	18	11	4	5	69	408.3
Medical/surgical/diagnostic								
Dialysis	_	_	2	_	_	_	2	n.p.
Radiology and organ imaging	5	13	1	_	1	1	21	248.0
Endoscopy	1	3	3	3	3	_	13	12.8
Pathology	1	4	_	_	_	1	6	263.8
Other	2	7	12	6	10	2	39	130.0
Psychiatric	3	1	2	3	2	_	11	31.7
Alcohol and drug	2	1	2	1	_	_	6	2.7
Dental	_	1	1	_	_	_	2	n.p.
Pharmacy	2	_	_	_	_	1	3	n.p.
Allied health services	6	12	1	4	3	3	29	384.1
Community health	3	2	1	1	1	1	9	48.0
District nursing services	2	4	_	_	_	_	6	36.8
Non-medical and social services	2	2	_	_	4	_	8	6.5
Other	8	7	5	4	8	_	32	59.7
All hospitals(b)	22	51	27	21	20	6	147	1 670.3

⁽a) Including hospitals which did not have a formal accident and emergency unit but which treated accident and emergency patients during the year.

⁽b) Many hospitals have more than one type of designated unit or ward and so are counted in more than one row.

	General	Specialist			
	surgery	endoscopy	Ophthalmic	Other(a)	Total
• • • • • • • • • • • • • • • • • • • •	• • • • •	• • • • • • •	• • • • • • • •	• • • • • • • • • •	• • • • • • •
Number of hospitals					
New South Wales and					
Australian Capital Territory	31	20	15	24	90
Victoria	8	15	4	3	30
Queensland	8	4	6	8	26
South Australia and					
Northern Territory	2	2	1	9	14
Western Australia	5	1	2	4	12
Tasmania	1	_	1	1	3
Australia	55	42	29	49	175
Operating theatres at 30 June (no.)	90	n.p.	38	n.p.	175
Procedure rooms at 30 June (no.)	23	58	12	55	148
Average number of sessions(b)	4	4	2	3	4
Average theatre/room time used (hours)(b)	15	17	9	18	16
Average number of beds/chairs	596	303	132	317	1 348
Separations ('000)	96.5	89.9	21.6	63.8	271.7
Average number of separations per bed/chair	162	297	164	201	202

⁽a) Including fertility, plastic surgery and sleep disorders clinics.

23

FREE-STANDING DAY HOSPITALS, Number of Full-time Equivalent Staff

Staff	General surgery	Specialist endoscopy	Ophthalmic	Other(a)	Total
• • • • • • • • • • • • • • • • • • • •	• • • • • •	• • • • • • •	• • • • • • • • •	• • • • • • •	• • • • • • • • • • •
Nursing staff Administrative and clerical Other(b) Total	295.0 112.9 32.8 440.7	137.0 119.2 18.9 275.1	67.1 62.1 22.4 151.6	196.6 103.5 52.2 352.3	695.7 397.6 126.4 1 219.7

⁽a) Including fertility, plastic surgery and sleep disorders clinics.

⁽b) Per theatre/room per week.

 $[\]begin{tabular}{ll} \textbf{(b)} & \textbf{Including diagnostic and health professionals, orderlies, domestic and maintenance staff.} \end{tabular}$

Revenue	General surgery	Specialist endoscopy	Ophthalmic	Other(a)	Total
• • • • • • • • • • • • • • • • • • • •	• • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • • • •
Revenue (\$'000)					
Patient revenue	45 087	28 250	25 622	40 104	139 062
Other(b)	1 437	2 004	(c)689	2 086	6 216
Total	46 524	30 254	26 310	42 190	145 278
Patient revenue as a proportion of total					
revenue (%)	96.9	93.4	97.4	95.1	95.7

⁽a) Including fertility, plastic surgery and sleep disorders clinics.

- (b) Investment income, income from charities, bequests, visitors' meals and accommodation and kiosk sales.
- (c) Care should be exercised when making comparisons as 1996–97 data has been revised.

FREE-STANDING DAY HOSPITALS, Expenditure

Particulars	General surgery	Specialist endoscopy	Ophthalmic	Other(a)	Total
•••••	• • • • • •	• • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • • • •
Recurrent expenditure(b) (\$'000)					
Wages and salaries including on-costs	16 723	11 523	7 309	15 492	51 047
Drug, medical and surgical supplies	9 270	2 783	5 060	7 738	24 852
Administrative expenses	8 803	3 610	3 392	6 746	22 551
Other(c)	7 075	4 990	4 780	7 017	23 862
Total	41 871	22 906	20 541	36 994	122 311
Wages and salaries including on-costs as a proportion of total recurrent expenditure (%)	39.9	50.3	35.6	41.9	41.7
Average recurrent expenditure(d) Per separation (\$)	434	255	951	580	450
Gross capital expenditure (\$'000)	8 058	2 213	7 488	9 208	26 967

⁽a) Including fertility, plastic surgery and sleep disorders clinics.

⁽b) See Explanatory Notes, paragraph 11.

⁽c) Comprising repairs and maintenance, interest, depreciation and contract services.

⁽d) Average expenditure figures can vary considerably between hospitals depending on the type of services they provide.

	Procedures	
Description and Medicare Benefits Schedule (MBS) item number(a)	no.	%
	• • • • • • • •	• • • • •
Oesophagoscopy, gastroscopy, duodenoscopy or panendoscopy, one or more such procedures (30473) Fibre optic colonoscopy — examination of colon beyond the hepatic flexure (32090) Lens extraction and insertion of artificial lens (42702)	63 166 49 961 24 004	19.5 15.4 7.4
Evacuation of the contents of the gravid uterus by curettage or suction curettage (35643) Administration of chemotherapy, either by intravenous push technique, of intravenous infusion (13915, 13918, 13921 and 13924) Fibre optic colonoscopy — examination of colon beyond the hepatic flexure with removal of one or more	16 370 n.p.	5.1 n.p.
polyps (32093)	13 115	4.1
Oocyte retrieval by any means for the purposes of assisted reproductive technologies (13212) Transfer of embryos or both ova and sperm to the female reproductive system, by any means but excluding artificial insemination or the transfer of frozen or donated embryos (13215)	4 075	1.3 1.2
Flexible fibre optic sigmoidoscopy or fibre optic colonoscopy up to the hepatic flexure, with or without biopsy (32084)	4 012 3 393	1.0
Administration of blood or bone marrow already collected (13706) Uterus, curettage of, (including curettage for incomplete miscarriage) under general anaesthesia, or under	n.p.	n.p.
epidural or spinal (intrathecal) nerve block (35639 and 35640) All other procedures	n.p. 126 438	n.p. 39.0
Total	323 585	100.0

⁽a) Certain MBS item numbers shown in previous years have been recategorised and allocated to two or more new MBS item numbers.

	General surgery	Specialist endoscopy	Ophthalmic	Other(a)	Total
		PROPORTIC	N		
	%	%	%	%	%
Nil or local					
Nil	2.0	0.7	0.1	34.1	9.0
Local/topical	12.8	0.3	37.4	26.8	13.9
Total	14.8	1.0	37.5	61.0	22.9
Other types of anaesthesia					
General	37.6	n.p.	1.3	n.p.	19.4
Regional	n.p.	n.p.	39.7	0.4	8.2
Intravenous/neuroleptic	n.p.	n.p.	12.6	10.6	46.2
Multiple	5.4	n.p.	9.0	n.p.	3.4
Total	85.2	99.0	62.5	39.1	77.1
Total	100.0	100.0	100.0	100.0	100.0
• • • • • • • • • • • • • • • • • • • •		• • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • • • •
		NUMBER			
	'000	'000	'000	'000	'000
All separations	96.5	89.9	21.6	63.8	271.7

⁽a) Including fertility, plastic surgery and sleep disorder clinics.

	Acute and psychiatric hospitals	Free-standing day hospital facilities	Total hospitals
• • • • • • • • • • • • • • • • • • • •	PROPORTION	• • • • • • • • • • • •	• • • • • • • • • • • •
	%	%	%
Hospital insurance	75.9	55.9	73.0
No hospital insurance	22.1	42.5	25.1
Not stated	2.0	1.5	2.0
Total	100.0	100.0	100.0
	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •
	NUMBER		
	'000	'000	'000
All separations	1 585.3	271.7	1 857.0

ALL HOSPITALS, Separations—Age and Sex

		AND PSYCH		FREE-STANDING DAY HOSPITAL FACILITIES			TOTAL HOSPITALS		
Age group (years)	Males	Females	Persons	Males	Females	Persons	Males	Females	Persons
• • • • • • • • •	• • • • • •	• • • • • • •	• • • • • • • •	PROPOR	TION	• • • • • • • •	• • • • • • •	• • • • • • •	• • • • • • •
	%	%	%	%	%	%	%	%	%
0–14	7.4	4.3	5.7	2.7	1.7	2.1	6.8	3.9	5.2
15–44	24.0	37.3	31.4	24.7	39.0	33.1	24.1	37.5	31.6
45–64	30.7	27.5	28.9	36.6	29.9	32.7	31.5	27.8	29.5
65 and over	37.8	30.9	34.0	34.4	28.2	30.8	37.4	30.5	33.5
Total(a)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Proportion of persons	44.5	55.5	100.0	41.6	58.4	100.0	44.1	55.9	100.0
				NUMBI	ER				
	'000	'000	'000	'000	'000	'000	'000	'000	'000
All separations	705.4	879.8	1 585.3	113.0	158.7	271.7	818.5	1 038.5	1 857.0

⁽a) Including not stated.

Principal diagnosis	Acute and psychiatric hospitals	Free-standing day hospital facilities	Total hospitals
• • • • • • • • • • • • • • • • • • • •	PROPORTION	• • • • • • • • • • • •	• • • • • • • • • • • • •
	%	%	%
Infectious diseases	0.7	0.3	0.6
Neoplasms	8.4	10.8	8.7
Endocrine disorders	0.9	0.5	0.8
Diseases of blood	0.8	0.9	0.8
Mental disorders	4.5	_	3.9
Diseases of nervous system	7.1	13.2	8.0
Diseases of circulatory system	7.2	3.3	6.6
Diseases of respiratory system	4.6	0.4	4.0
Diseases of digestive system	15.4	31.0	17.7
Diseases of genitourinary system	8.5	5.5	8.1
Complications of pregnancy	5.7	6.1	5.7
Diseases of skin	1.6	2.4	1.7
Diseases of musculoskeletal system	10.6	2.5	9.4
Congenital anomalies	0.6	0.4	0.5
Conditions of perinatal period	0.6	_	0.5
Symptoms, signs and ill-defined			
conditions	4.9	9.0	5.5
Injury and poisoning	4.6	0.8	4.0
Supplementary classifications	13.6	12.9	13.5
Total	100.0	100.0	100.0
• • • • • • • • • • • • • • • • • • • •			
	NUMBER		
	'000	'000	'000
All separations	1 585.3	271.7	1 857.0

Principal procedure	Acute and psychiatric hospitals	Free-standing day hospital facilities	Total hospitals					
PROPORTION								
O a service as a s	%	%	%					
Operations on								
Nervous system	2.7	0.7	2.3					
Endocrine system	0.3	_	0.2					
Eye	5.0	13.9	6.5					
Ear	1.9	1.3	1.8					
Nose, mouth, pharynx	7.3	5.1	6.9					
Respiratory system	0.8	n.p.	n.p.					
Cardiovascular system	7.1	2.4	6.3					
Hemic and lymphatic system	0.4	0.4	0.4					
Digestive system	20.4	42.9	24.2					
Urinary system	3.7	1.9	3.4					
Male genital organs	2.3	0.7	2.0					
Female genital organs	7.1	10.4	7.6					
Obstetric procedures	4.3	n.p.	n.p.					
Musculoskeletal system	12.9	2.7	11.2					
Breast	1.7	0.6	1.5					
Other operations on skin and								
subcutaneous tissue	3.8	6.7	4.3					
Diagnostic radiology and related								
techniques	2.5	0.1	2.1					
Other miscellaneous diagnostic and								
therapeutic procedures	16.1	9.2	15.0					
Total	100.0	100.0	100.0					
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • •	• • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •					
	NUMBER							
	'000	'000	1000					
All separations	1 367.4	270.6	1 638.0					
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • •						

DISCHARGE OR TRANSFER TO....

	Usual residence(a)	Nursing home	Other hospital	Lei Died	ft against advice	Other(b)	Total	
	'000	'000	'000	'000	'000	'000	'000	
• • • • • • • • • • • • • • • • • • • •		• • • • • • •	• • • • • • • •	• • • • • • • • • •				
	ACUTE A	ND PSYCHIA	ATRIC HOSP	PITALS				
New South Wales and								
Australian Capital Territory	432.4	1.4	6.2	2.6	0.6	2.4	445.6	
Victoria	420.5	1.7	11.1	3.7	0.2	0.5	437.8	
Queensland(c)	327.6	1.5	4.0	3.5	0.2	2.3	339.0	
South Australia and								
Northern Territory	138.0	2.1	4.3	1.3	0.1	0.8	146.5	
Western Australia	161.2	n.p.	1.8	1.4	n.p.	n.p.	165.2	
Tasmania	49.9	n.p.	0.2	0.3	n.p.	n.p.	51.1	
Australia	1 529.6	7.2	27.5	12.9	1.4	6.7	1 585.3	
FREE-STANDING DAY HOSPITAL FACILITIES								
Total	263.1	0.1	5.3	_	n.p.	n.p.	271.7	
ALL HOSPITALS								
Total	1 792.8	7.3	32.8	12.9	1.7	9.5	1 857.0	

⁽a) Including own accommodation/welfare institution, including prisons, hostels and group homes providing primarily welfare services.

⁽b) Includes discharge or transfer to another health care accommodation, status change, statistical discharge and not stated.

⁽c) See Explanatory Notes, paragraphs 17–19.

EXPLANATORY NOTES

INTRODUCTION

- **1** This publication contains statistical information for 1997–98 and previous years, obtained from annual censuses of all private hospitals in Australia. It contains details about the facilities, activities, staffing and finances of all private acute and psychiatric hospitals and free-standing day hospital facilities.
- **2** Corresponding statistics for public hospitals are compiled by the Australian Institute of Health and Welfare (AIHW) in their annual publication *Hospital Statistics*, *Australia*.

SCOPE

3 Included are all private acute and psychiatric hospitals licensed by State and Territory health authorities and all free-standing day hospital facilities approved by the Commonwealth Department of Health and Aged Care.

COLLECTION METHODOLOGY

4 Data collection forms are sent each year to all private hospitals in Australia for completion and return to the ABS. A large component of the required data on admitted patients is sent to the ABS by State and Territory health authorities on behalf of hospitals, thus relieving hospitals of the task of collating this information for the ABS.

COVERAGE

- **5** All private hospitals in Australia which operated for all or only part of the reference year are included in the collection.
- **6** Updated lists of private hospitals are received from State, Territory and Commonwealth health authorities and every effort is made to include all hospitals in scope.

DEFINITIONS

7 The data items and definitions are based on the National Health Data Dictionary published by the AIHW, with the addition of data items requested by private hospital associations and health authorities. Refer to the Glossary for definitions of the main data items used in this publication.

DATA QUALITY

- **8** Establishments which provided incomplete data were contacted to obtain the missing details. Hospital staff were asked to provide estimates in cases where records for the data item were not kept. If reasonable estimates could not be provided by the establishment then the data item was either left blank or imputed by ABS staff. Imputation was based on data received in previous years and on the results of the data provided by all responding hospitals.
- **9** The statistics from this collection may be subject to various sources of error. These may be errors in reporting (e.g. because estimates may have been used in the case of actual data not being available, misunderstanding of questions or unwillingness of respondents to reveal all details) or errors arising during processing (e.g. coding, data recording). Every effort is made to reduce errors in the collection to a minimum by careful design of questionnaires and by processing procedures designed to detect errors and enable them to be corrected. These procedures include external coverage checks, clerical and computer editing of input data, error resolution including referral back to the source, and clerical scrutiny of preliminary aggregates.

DATA QUALITY continued

- **10** Hospital morbidity data, providing admitted patients' details such as age, principal diagnosis and procedure, are routinely provided by hospitals to State and Territory health authorities. Arrangements were made, with consent of the hospitals, for State and Territory health authorities to provide the ABS with the relevant morbidity data. Any significant inconsistencies between the data collated by health authorities and by hospitals were followed up and resolved. Preliminary 1997–98 hospital morbidity data was provided by New South Wales Health because final data were not ready in time for inclusion in this publication. The preliminary data excluded some 15,000 patient records (approximately 3% of the total). The data have been adjusted upwards to agree with the complete totals for separations and patient days as provided directly by individual hospitals.
- **11** Differences in accounting policy and practices lead to some inconsistencies in the financial data provided by hospitals. Measurement of expenditure is affected by management policy on such things as depreciation rates, bad debt and goodwill write-off. Further inconsistency occurs in cases where all property and fixed asset accounts are administered by a parent body or religious order headquarters and details are not available for the individual hospitals.
- **12** Casemix is an information tool which recognises that there are similarities between groups of hospital patients. A special feature of a Casemix classification is that for each class, patients will have clinical similarities and will be homogeneous with respect to another variable such as the cost of care.
- **13** In Australia, a system of Diagnosis Related Groups (AN-DRG) is used as a means of classifying patients for Casemix purposes. Each AN-DRG represents a class of patients with similar clinical conditions requiring similar total hospital resources for their treatment.
- **14** This classification is used by most States and Territories as a management tool for public hospitals and, to varying degrees, for their funding. The classification is becoming more widely used by private hospitals as a reporting tool. Some contracting between health funds and private hospitals is gradually incorporating charging for patients based on their Casemix classification. As a result, there may be a reduction in the number of patients for whom a patient accommodation classification (which currently categorises overnight-stay patients into advanced surgery, surgery and obstetrics) is available.

COUNTING METHODS

15 The method of counting patient separations and patient days was changed for 1995–96 in accordance with procedures outlined in the National Health Data Dictionary. Previously, a patient separation was recorded only when the patient left hospital, and total hospital stay was attributed to that separation. The concept of 'episode of care' has now been introduced to facilitate Casemix classification and cost analysis of patient treatment. Under this concept, if there is a change in the type of clinical treatment, a statistical separation is recorded. For example, if a patient is admitted for acute care and subsequently receives non-acute care (e.g. nursing home type care) until discharged, then one separation and the number of days are recorded for the acute care episode and one separation and the number of days for the non-acute episode are also recorded.

COUNTING METHODS continued

- **16** Generally, these changes have only a small effect on the data for private hospitals. However, this change in counting method has initial impact on the data for 1995–96, as towards the end of that year there were fewer patient days being carried forward into the 1996–97 financial year. This reduction in patient days in 1996–97, in conjunction with the increase in the number of separations, may have contributed to the reduction in the average length of time that patients spent in hospital in 1996–97 compared to 1995–96. The new method provides a more realistic measure of the actual number of patient days occurring in any one year and annual data from 1996–97 onwards are directly comparable. However, the effect of its introduction on 1995–96 data should be taken into account when comparing post 1995–96 data with earlier years.
- **17** In order to prepare for this new reporting procedure, all nursing home type patients in Queensland hospitals were statistically discharged and re-admitted on 1 July 1995. The premature reporting of patient days associated with these statistical separations produced an overstatement of the number of patient days in Queensland for 1995–96. Therefore, care should be exercised when comparing across States and Territories.
- **18** Although the total number of nursing home type separations was relatively small (approximately 1,000) for Queensland private hospitals in 1995–96, there were 232,000 patient days associated with them. As a consequence, the occupancy rate and average length of stay were affected at State and national levels.
- **19** The effects of overstatement of patient days in 1995–96 is shown below. The figures in brackets have been adjusted to reduce nursing home type patient days to the same levels as for 1994–95.

	1995–96	1996–97		
Queensland				
Patient days				
Number ('000)	1 466	(1348)	1 345	
Increase since previous year (%)	20.9	(11.2)	-8.2	
Occupancy rate (%)	80.9	(74.4)	73.4	
Average length of stay (days)	4.4	(4.1)	3.9	
Australia				
Patient days				
Number ('000)	5 844	(5 744)	5 854	
Increase since previous year (%)	7.8	(5.9)	0.2	
Occupancy rate (%)	70.4	(69.2)	69.8	
Average length of stay (days)	4.0	(4.0)	3.8	

CHAIN VOLUME MEASURES

20 Chain volume measures have been used in this publication to enable analysis of the changes to recurrent expenditure for private hospitals in 'real' terms. It is considered that these measures provide better indicators of movement in real output and expenditures than do constant price estimates. Unlike constant price estimates, they take account of changes to price relativities that occur from one year to the next. Chain volume measures are derived by deflating (or dividing) the original current price series of recurrent expenditure for private hospitals by a specifically compiled measure of price change. The reference period for the chain volume measure is 1996–97. In this publication the index used was specifically designed to measure price change in hospital recurrent expenditures. The data used are consistent with the March quarter 1999 Australian National Accounts: National Income, Expenditure and Product (ABS Cat. no. 5206.0). Detailed information on chain volume measures and their introduction into the Australian National Accounts are contained in:

Information Paper: Australian National Accounts, Introduction of Chain Volume and Price Indexes (ABS Cat no. 5248.0); and

Information Paper: Upgraded Australian National Accounts, 1998 (ABS Cat no. 5253.0)

CLASSIFICATIONS

- **21** The principal diagnosis and principal procedure for admitted patients are reported using the International Classification of Diseases, 9th Revision Clinical Modification.
- **22** The locations of all private health establishments are coded according to the Australian Standard Geographical Classification, 1996 Edition.

GENERAL ACKNOWLEDGMENT

23 ABS publications draw extensively on information provided by individuals, businesses, governments and other organisations. Their continued cooperation is very much appreciated. Information received by the ABS is treated in strict confidence as required by the *Census and Statistics Act 1905*.

RELATED PUBLICATIONS

24 Other ABS publications which may be of interest include:

Hospitals Australia, 1991–92 (Cat. no. 4391.0) — Issued co-jointly with the AIHW, released 1995 (\$22.00)

Information Paper: Australian National Accounts, Introduction of Chain Volume and Price Indexes (Cat no. 5248.0) —
Released 19 March 1998 (\$10.00)

Information Paper: Upgraded Australian National Accounts, 1998 (Cat. no. 5253.0) — Released 4 November 1998 (\$10.00)

National Health Survey: Private Health Insurance, Australia, 1995 (Cat. no. 4334.0) — Released 28 May 1998 (\$17.00)

National Health Survey: Summary of Results, 1995 (Cat. no. 4364.0) — Released 28 August 1997 (\$23.00)

National Health Survey: Summary Results, Australian States and Territories, 1995 (Cat. no. 4368.0) — Released 23 December 1997 (\$21.00)

RELATED PUBLICATIONS continued

25 The following related publications are issued by other organisations.

Available from the AIHW Distribution Centre, GPO Box 84, Canberra ACT 2601:

Australian Hospital Statistics, 1993–95: An Overview

Australian Hospital Statistics, 1997–98

Medical Labour Force, 1996

National Health Data Dictionary, Version 7.0, 1998

National Health Labour Force Bulletin

Nursing Labour Force, 1995

Pharmacy Labour Force, 1995

Available from the Australian Government Info Shop, 10 Mort Street, Braddon ACT 2612:

Australian Casemix Report, 1995-96

First National Report on Health Sector Performance Indicators: Public Hospitals — The State of Play

Available from the National Mental Health Report Service (Mental Health Branch, Department of Health and Aged Care — telephone Canberra 02 6289 3985):

National Mental Health Report, 1997

26 Current publications produced by the ABS are listed in the *Catalogue of Publications and Products* (Cat. no. 1101.0). The ABS also issues the *Release Advice* (Cat. no. 1105.0) on Tuesdays and Fridays which lists publications to be released in the next few days. Both the Catalogue and the Release Advice are available from any ABS office.

UNPUBLISHED STATISTICS

27 As well as the statistics included in this and related publications, the ABS may have other relevant unpublished data available. Inquiries should be directed to Keith Carter on Brisbane 07 3222 6374, or at keith.carter@abs.gov.au.

EFFECTS OF ROUNDING

28 Where figures have been rounded, discrepancies may occur between totals and sums of the component items.

Acute hospitals These provide at least minimal medical, surgical or obstetrical services for

admitted patient treatment and/or care and provide round-the-clock comprehensive qualified nursing service as well as other necessary professional services. They must be licensed by the State or Territory health authority. Most of the patients have acute conditions or temporary ailments and the average stay

per admission is relatively short.

Administrative expenses Includes management and administrative support expenditure such as rates and

taxes, printing, telephone, stationery, insurances and motor vehicle running

expenses.

Allied health services These are provided by units and clinics for the treatment and counselling of

patients. They mainly comprise physiotherapy, speech therapy, family planning,

dietary advice, optometry and occupational therapy.

Average length of stay This is calculated by dividing the aggregate number of patient days by the in hospital

number of separations associated with those patient days.

Beds These are provided for the care and treatment of same-day and overnight-stay

Approved beds for acute and psychiatric hospitals are those for which the hospital is licensed to operate under the relevant State or Territory

government legislation.

Available beds are those immediately available (occupied and unoccupied) for the care of admitted patients as required. In the case of free-standing day hospital facilities, they include chairs, trolleys, recliners and cots.

Occupied beds are calculated by dividing total patient days by the number of days in the year (365 in 1997-98).

Capital expenditure Comprises expenditure on land and buildings, computer facilities, major medical

> equipment, plant and other equipment, and expenditure in relation to intangible assets, having regard to guidelines followed as to the differentiation between

capital and recurrent costs.

These provide investigation and treatment for acute conditions on a day-only Free-standing day

basis and are approved by the Commonwealth for the purposes of basic table

health insurance benefits.

hospital facilities

Hospital type 'Not-for-profit' hospitals are those which qualify as a non-profit organisation with

either the Australian Taxation Office or the Australian Securities and Investment Commission. These are further categorised as 'religious or charitable' and 'other'.

All other hospitals are classed as 'for profit'.

Insurance status Indicates whether or not hospital insurance is held with a registered health

> insurance fund, or a general insurance company. Patients who have insurance cover only for ancillary services are regarded as not having hospital insurance.

Legal Local Government Area Is the geographical area under the responsibility of an incorporated local

government council.

Occasions of service Any services provided to a non-admitted patient in a functional unit (e.g.

radiology) of the hospital. Each diagnostic test or simultaneous set of related

diagnostic tests is counted as one occasion of service.

Occupancy rate Is cal

Is calculated by dividing patient days by the product of average number of beds and the number of days in the year (365 in 1997–98) and expressed as a percentage,

i.e. occupancy rate (%) = <u>patient days x 100</u> average available beds x 365

Other domestic services

Includes staff services, accommodation, bedding and linen, hardware, crockery, cutlery, laundering and cleaning of uniforms.

Patient

A patient is a person for whom a hospital accepts responsibility for treatment and/or care.

An *admitted patient* undergoes a hospital's formal admission process. Babies born in hospital are excluded unless they are provided with medical care other than that which would normally be provided to a newborn, or they remain in hospital after the mother has been discharged, or are the second or subsequent live born infant of a multiple birth and the mother is currently an admitted patient. Persons accompanying a sick patient (e.g. nursing mothers and parents accompanying sick children) are also excluded.

Overnight-stay patients are admitted to and separated from hospital on different dates (i.e. they stay at least one night in hospital).

Same-day patients are admitted and separated on the same day (i.e. they are in hospital for a period that does not include an overnight stay).

Non-admitted patients do not undergo a hospital's formal admission process. These include outpatients, accident and emergency patients and off-site (community/outreach) patients.

Patient classification

Applies to all overnight-stay patients and is used to facilitate patient billing. It includes the categories, advanced surgery, surgery and obstetrics as defined by the Commonwealth Department of Health and Aged Care for health fund benefits purposes. The other categories included under patient classification are psychiatric, rehabilitation and nursing home type. Psychiatric includes all admitted patients of an approved psychiatric program. Similarly, rehabilitation includes all admitted patients of an approved rehabilitation program. Nursing home type relates to admitted patients staying 35 days or more for whom an acute care certificate has not been provided at the time of discharge. Patients not included in the previously defined categories are shown under 'Medical and other' in this publication.

In previous years, same-day patients were categorised according to patient classification but this practice has been discontinued for 1995–96 and later years.

Patient days

These are the aggregate number of days of stay (i.e. separation date minus admission date) for all overnight-stay patients who were separated from hospital during the year. Periods of approved leave are subtracted from these calculations. Same-day patients are each counted as having a stay of one day.

Procedures

Comprise advanced surgery, surgery and obstetrics as defined by the Commonwealth Department of Health and Aged Care for health insurance fund benefit purposes. Surgical procedures, other than those defined above, are shown as minor/other surgery in this publication. This latter category includes surgery not covered under Medicare, e.g. cosmetic surgery. Total procedures performed during the year relate to all such procedures regardless of type of patient (admitted or non-admitted patient).

Psychiatric hospitals

These are devoted primarily to the treatment and care of admitted patients with psychiatric, mental or behavioural disorders. Psychiatric hospitals are licensed/approved by each State or Territory health authority and cater primarily for patients with psychiatric or behavioural disorders.

Repairs and maintenance

Includes costs of maintaining, repairing, replacing and providing additional equipment, maintaining and renovating buildings, and minor additional works.

Revenue

Three categories of revenue are identified:

Patient revenue includes revenue received by, and due to, the hospital in respect of patient liability for accommodation and other fees, regardless of source of payment (Commonwealth, health fund, insurance company, direct from patient) or status of patient (whether admitted or non-admitted patient).

Recoveries includes income received from items such as staff meals, accommodation and facility fees paid by medical practitioners.

Other revenues includes revenue such as investment income from temporarily surplus funds and income from charities, bequests, meals and accommodation provided to visitors, and kiosk sales. Revenue payments received from State or Territory Governments are excluded.

Separation

Occurs when an admitted patient:

- is discharged;
- is transferred to another institution;
- leaves against medical advice;
- dies whilst in care;
- changes status, e.g. from acute to nursing home type; or
- leaves hospital for a period of seven or more days.

Staff Includes staff employed by the hospital and contract staff employed through an agency in cases where the contract is for the supply of labour.

Nursing staff comprises registered nurses, enrolled nurses, student nurses, trainee/pupil nurses and assistants in nursing.

Administrative and clerical staff includes computing and finance staff.

Domestic and other staff includes staff engaged in cleaning, laundry services, the provision of food, and also orderlies, porters, hospital attendants, and engineering and maintenance staff.

Full-time equivalent staff represents the sum of full-time staff and the full-time equivalent of part-time staff. It is derived by adding the on-job hours worked and hours of paid leave (sick, recreation, long service, workers' compensation leave) by/for a staff member (or contract employee where applicable) divided by the number of hours normally worked by a full-time staff member when on the job (or contract employee where applicable) under the relevant award or agreement.

Statistical divisions

These are groupings of the whole or part of legal Local Government Areas. They are designed to be relatively homogeneous regions characterised by identifiable social and economic units within the region. Capital City Statistical Divisions, shown in some tables of this publication, comprise Sydney, Melbourne, Brisbane, Adelaide, Perth, Greater Hobart, Darwin and Canberra.

Wages and salaries (including on-costs)

Includes wages and salaries, superannuation employer contributions, payroll tax, workers' compensation and workcare premiums, uniforms, education, personnel costs and fringe benefits tax.

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RRP \$18.50

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