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Glossary

For further information on the terms used in this report, refer to the definitions in use in 1995–96 in the *National Health Data Dictionary* Version 5.0.

<i>Acute</i>	Having a short and relatively severe course.
<i>Acute hospitals</i>	Public, Department of Veterans' Affairs (repatriation) and private hospitals which provide services predominantly to admitted patients with acute or temporary ailments; the average length of stay per admission is relatively short.
<i>Additional diagnoses</i>	Diagnoses or conditions that affect a person's care in terms of requiring therapeutic treatment, clinical evaluation, diagnostic procedures, extended length of hospital stay or increased nursing care and/or monitoring. Additional diagnoses include combined conditions (co-existing conditions) and/or complications (conditions that arose during the episode of care).
<i>Administrative and clerical staff</i>	Staff engaged in administrative and clerical duties. Civil engineers and computing staff are included in this category. Medical staff and nursing staff, diagnostic and health professionals and any domestic staff primarily or partly engaged in administrative and clerical duties are excluded.
<i>Administrative expenditure</i>	All expenditure incurred by establishments (but not central administrations) of a management expenses/administrative support nature such as any rates and taxes, printing, telephone, stationery and insurance expenses (including workers' compensation).
<i>Admitted patient</i>	A patient who undergoes a hospital's formal admission process.
<i>Admitted patient cost proportion</i>	The ratio of admitted patient costs to total hospital costs, also known as the inpatient fraction or IFRAC.
<i>Australian National Diagnosis Related Groups (AN-DRGs)</i>	An Australian system of Diagnosis Related Groups (DRGs). DRGs are a means of classifying hospital patients to provide a common basis for comparing factors such as cost effectiveness and quality of care across hospitals. Each AN-DRG represents a class of patients with similar clinical conditions requiring similar hospital services.
<i>Available beds</i>	Beds immediately available for use by admitted patients as required.
<i>Average length of stay</i>	The average of the length of stay for admitted patient episodes.

<i>Boarder</i>	A person who is receiving food and/or accommodation but for whom the hospital does not accept responsibility for treatment and/or care. A boarder is not admitted to the hospital, although a hospital may register a boarder. This excludes all babies born in hospital.
<i>Charging status</i>	The source of payment for the hospital services provided. Hospital services are not chargeable for public patients in public hospitals.
<i>Compensable patients</i>	Those patients entitled to, or who have been paid, compensation, damages, or other benefits (including a payment in settlement of a claim for compensation, damages or other benefits) in respect of the injury, illness or disease for which they have received care or treatment. More information is contained in the <i>National Health Data Dictionary</i> (Item P18).
<i>Department of Veterans' Affairs hospitals</i>	Acute care hospitals operated by the Commonwealth Department of Veterans' Affairs to provide hospital treatment for eligible veterans and their dependants at Commonwealth expense. Department of Veterans' Affairs hospitals are recorded as public sector hospitals for data reporting purposes.
<i>Department of Veterans' Affairs patient</i>	An eligible patient whose charges are met by the Department of Veterans' Affairs.
<i>Diagnostic and health professionals</i>	Qualified staff (other than qualified medical and nursing staff) engaged in duties of a diagnostic, professional or technical nature (but also including diagnostic and health professionals whose duties are primarily or partly of an administrative nature). This category includes all allied health professionals and laboratory technicians but excludes civil engineers and computing staff.
<i>Domestic and other staff</i>	Staff engaged in the provision of food and cleaning services. They include domestic staff, such as food services managers, primarily engaged in administrative duties. This category also includes all staff not elsewhere included (primarily maintenance staff, tradespersons and gardening staff).
<i>Domestic services expenditure</i>	The costs of all domestic services including electricity, other fuel and power, domestic services for staff, accommodation and kitchen expenses but not including salaries and wages, food costs or equipment replacement and repair costs.
<i>Drug supplies expenditure</i>	The cost of all drugs including the cost of containers.
<i>Enrolled nurses</i>	Second-level nurses who are enrolled in all States except Victoria where they are registered by the State registration board to practise in this capacity. Includes general enrolled nurses and specialist enrolled nurses (for example, mothercraft nurses in some States).
<i>External cause</i>	Environmental event, circumstance and/or condition as the cause of injury, poisoning and/or other adverse effect.

<i>Food supplies expenditure</i>	The cost of all food and beverages but not including kitchen expenses such as utensils, cleaning materials, cutlery and crockery.
<i>Full time equivalent staff</i>	Total full time equivalent units are on-job hours worked, hours of paid leave (sick, recreation, long service, workers' compensation) 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.
<i>Indigenous status</i>	Indigenous status of the person according to the following definition: An Aboriginal or Torres Strait Islander is a person of Aboriginal or Torres Strait Islander descent who identifies as an Aboriginal or Torres Strait Islander and is accepted as such by the community with which he or she is associated. Note that in the <i>National Health Data Dictionary</i> Version 5 this data item was titled <i>Aboriginality</i> .
<i>Ineligible patient</i>	A patient who is not eligible under Medicare.
<i>Insured patients</i>	Those patients who have hospital insurance in the categories of registered insurance (hospital insurance with a health insurance fund registered under the <i>National Health Act 1953</i> (Commonwealth)), general insurance (hospital insurance with a general insurance company under a guaranteed renewable policy providing benefits similar to those available under registered insurance) or, until 30 September 1995, employer health plans (hospital benefits payable under employer/employee funded plans similar to those available under registered insurance). Patients covered by insurance for benefits of ancillary services only are excluded.
<i>Interest payments</i>	Payments made by or on behalf of the establishment in respect of borrowings (for example, interest on bank overdraft) provided the establishment is permitted to borrow.
<i>Length of stay</i>	The length of stay of a patient is calculated by subtracting the date the patient is admitted from the date of separation. All leave days, including the day the patient went on leave, are excluded. A same day patient is allocated a length of stay of one day.
<i>Major Diagnostic Categories (MDCs)</i>	A high level of groupings of patients used in the AN-DRG classification.
<i>Medical and surgical supplies expenditure</i>	The cost of all consumables of a medical or surgical nature (excluding drug supplies) but not including expenditure on equipment repairs.
<i>Non-admitted patient occasion of service</i>	Occurs when a patient attends a functional unit of the hospital for the purpose of receiving some form of service, but is not admitted. A visit for administrative purposes is not an occasion of service.
<i>Non-admitted patients</i>	Patients who receive care from a recognised non-admitted patient service/clinic of a hospital.

<i>Other personal care staff</i>	This category includes attendants, assistants or home assistants, home companions, family aides, ward helpers, wardsmen, orderlies, ward assistants and nursing assistants engaged primarily in the provision of personal care to patients or residents, who are not formally qualified or undergoing training in nursing or allied health professions.
<i>Other recurrent expenditure</i>	Recurrent expenditure not included elsewhere in any of the recurrent expenditure categories.
<i>Other revenue</i>	All other revenue received by the establishment that is not included under patient revenue or recoveries (but not including revenue payments received from State or Territory governments). This would include revenue such as investment income from temporarily surplus funds and income from charities, bequests and accommodation provided to visitors.
<i>Patient days</i>	The number of full or partial days of stay for patients who were admitted for an episode of care and who underwent separation during the reporting period. A patient who is admitted and separated on the same day is allocated one patient day.
<i>Patient revenue</i>	Revenue received by, and due to, an establishment in respect of individual patient liability for accommodation and other establishment charges.
<i>Patient transport</i>	The direct cost of transporting patients excluding salaries and wages of transport staff.
<i>Payments to visiting medical officers</i>	All payments made to visiting medical officers for medical services provided to hospital (public patients) on a sessionally paid or fee-for-service basis.
<i>Place of occurrence of external cause</i>	The place where the external cause of injury, poisoning or violence occurred.
<i>Principal diagnosis</i>	The diagnosis established after study to be chiefly responsible for occasioning the patient's episode of care in hospital.
<i>Principal procedure</i>	The most significant procedure that was performed for treatment of the principal diagnosis.
<i>Private hospital</i>	Privately owned and operated institution, catering for patients who are treated by a doctor of their own choice. Patients are charged fees for accommodation and other services provided by the hospital and relevant medical and paramedical practitioners. Acute and psychiatric hospitals are included.
<i>Private patients</i>	Eligible persons who, on admission, elect to be treated by the medical practitioner of their own choice and who are charged fees for accommodation and other services provided by the hospital and relevant medical practitioners, or elect to be accommodated in a single room in a public hospital.

<i>Psychiatric hospitals</i>	Institutions which provide treatment and care for patients with psychiatric, mental or behavioural disorders.
<i>Public (hospital) patients</i>	Eligible persons who, on admission to a public hospital, elect to be public patients and who are not charged for the care and treatment provided by the hospital.
<i>Public acute hospitals</i>	Establishments controlled by State and Territory health authorities which provide acute care. They provide free shared-ward accommodation and treatment by a hospital-appointed doctor. In addition they provide, to those who choose to be private patients, private ward accommodation and/or doctor of choice.
<i>Recoveries</i>	All revenue received that is in the nature of a recovery of expenditure incurred. This would include: <ul style="list-style-type: none"> • income received from the use of hospital facilities by salaried medical officers exercising their rights of private practice and by private practitioners treating private patients in hospital; and • other recoveries such as those relating to inter-hospital services where the revenue relates to a range of different costs and cannot be clearly offset against any particular cost.
<i>Recurrent expenditure</i>	Expenditure which recurs continually or frequently (for example, salaries). It may be contrasted with capital expenditure, such as the cost of hospital buildings and diagnostic equipment, for which expenditure is made infrequently.
<i>Registered nurses</i>	Nurses with at least a three-year training certificate and nurses holding post-graduate qualifications. Registered nurses must be registered with a State or Territory registration board.
<i>Repairs and maintenance expenditure</i>	The costs incurred in maintaining, repairing, replacing and providing additional equipment, maintaining and renovating building and minor additional works.
<i>Salaried medical officers</i>	Medical officers engaged by the hospital on a full time or part time salaried basis.
<i>Same day patients</i>	Same day patients are admitted patients who are admitted and separated on the same date.
<i>Separation</i>	The formal process by which a hospital records the completion of treatment and/or care for an admitted patient. This occurs when an admitted patient is discharged from hospital, transfers to another institution, dies or has a change in type of episode of care.
<i>Specialised service</i>	A facility or unit dedicated to the treatment or care of patients with particular conditions or characteristics. For details see item E4 in the <i>National Health Data Dictionary</i> .

<i>Student nurses</i>	Nurses employed by the establishment currently studying in years one to three of a three-year certificate course. This includes any person commencing or undertaking a three-year course of training leading to registration as a nurse by the State or Territory registration board. This includes full-time general student nurses and specialist student nurses, such as mental deficiency nurses, but excludes practising nurses enrolled in post-basic training courses.
<i>Superannuation payments</i>	Contributions paid or (for an emerging cost scheme) that should be paid (as determined by an actuary) on behalf of establishment employees either by the establishment or a central administration such as a State health authority, to a superannuation fund providing retirement and related benefits to establishment employees.
<i>Trainee/pupil nurses</i>	Nurses that are commencing or undertaking a one year course of training leading to registration as an enrolled nurse on the State/Territory registration board (includes all trainee nurses).
<i>Type of admitted patient episode (chapter 2)</i>	A classification of admitted patient episodes into broad groups based on principal diagnosis, principal procedure or status as a nursing home type or rehabilitation patient. See Item A8 in the <i>National Health Data Dictionary</i> for further details.
<i>Type of episode of care (chapter 9)</i>	A phase of treatment for an admitted patient, categorised as acute care, rehabilitation care, palliative care, non-acute care, unqualified neonate or other. The total hospital stay of the patient may be made up of one or more episodes of care.
<i>Type of non-admitted patient occasion of service</i>	A broad classification of services provided to non-admitted patients. See Item A9 in the <i>National Health Data Dictionary</i> for further details.
<i>Unqualified neonate</i>	A baby who is aged 9 days old or less that meets one of the following criteria: <ul style="list-style-type: none"> • is a single live birth or the first live born infant of a multiple birth, whose mother is currently an admitted patient; • is not admitted to an intensive care facility in a hospital, being a facility approved by the Commonwealth Minister for the purpose of the provision of special care.
<i>Visiting medical officer</i>	A medical practitioner appointed by the hospital board to provide medical services for hospital (public) patients on an honorary, sessionally paid, or fee-for-service basis.