

4 Overview of activity in Australian hospitals

Introduction

This chapter presents summary statistics for admitted patients in public and private hospitals, and for non-admitted patients in public hospitals. Information is presented on the basis of the sector of the hospital, the type of hospital within the sector, and the type of service within public hospitals. Later chapters present information on the basis of characteristics of the patients and their hospital stays (Chapters 5 to 10).

Tables 4.1 and 4.2 are derived from the National Hospital Morbidity Database and present summary separation, patient day, average length of stay and average cost weight information by hospital sector and type. Table 4.1 reports the available national statistics for the years 1991–92 to 1996–97 and Table 4.2 reports the statistics for 1996–97 by State and Territory. With the exception of unqualified neonates (see Glossary), all types of episode of care are included, except as noted below for the average cost weight information. That is, separations for which the type of episode of care was rehabilitation care, palliative care, non-acute care and other care are included.

For 1996–97, the hospital sectors and types included are public acute hospitals, public psychiatric hospitals, private freestanding day facilities and other private hospitals. Data are also presented aggregated to all public hospitals, all acute hospitals (that is, excluding public psychiatric hospitals), all private hospitals and all hospitals.

Tables 4.3 and 4.4 present summary separation and patient day information from the National Public Hospital Establishments Database by type of admitted patient episode. These categories (as defined in the *National Health Data Dictionary*) describe the broad programs of health care provided to admitted patients.

In most States and Territories, there are some differences between the reporting of separations and patient days to the National Hospital Morbidity and the National Hospital Establishments databases as presented in this Chapter. A brief discussion of these differences may be found in the technical notes (Appendix 1).

Data on non-admitted patient occasions of service in public hospitals, also derived from the National Public Hospital Establishments Database, are summarised in Table 4.5. The occasions of service are categorised by service type and provide information on the range of emergency department, outpatient and other non-admitted services provided by public hospitals.

Highlights

Admitted patients by sector and hospital type

Separations

There were 5,326,915 separations reported from public and private acute and psychiatric hospitals in 1996–97 (Table 4.2), an increase of 3.0% compared with 1995–96 (Table 4.1). For public acute and private hospitals combined (that is, excluding public psychiatric hospitals), there were 5,306,553 separations, an increase of 3.1% (160,587) compared with 1995–96, and a continuation of the annual increase in separations over the last few years. Overall, public hospital separations increased by 1.4% (48,632) compared with 1995–96 and there was a 6.8% (107,474) increase in the private sector.

Public patient separations comprised 84% (3,058,357) of public acute hospital separations, an increase over the 83% reported in 1995–96, 79% in 1994–95 and 78% reported in 1993–94. Complementary to this, there was a decrease in private patient separations in public acute hospitals. Further detail on patient accommodation status is presented in Chapter 5.

The number of separations reported for public psychiatric hospitals declined by 6,570, a reduction of 26% when compared with 1995–96 hospital morbidity data (excluding Queensland for which there was no report on psychiatric hospital separations in 1995–96). This reflects the implementation of national reform policies which have resulted in a reduction in the number of beds in public psychiatric hospitals (AIHW 1998c, CofA 1998). Note that the scope of 1995–96 data in this report differs from the scope of 1995–96 data for public psychiatric hospitals presented in the *National Mental Health Report 1996* (CofA 1998) which is extracted from the National Survey of Mental Health Services database.

The private sector accounted for 31.6% of separations (1,684,948), compared with 30.5% (1,577,474) in 1995–96. Private free-standing day hospital facilities, which were reported separately to the Institute for the first time in 1996–97, accounted for 221,398 or 13% of private sector separations.

Same day separations

1996–97 saw a continuation of the recent annual increases in the proportions of admitted patients being treated on a same day basis, that is, admitted and separated on the same date. This reflects changing medical practice, efforts to increase hospital productivity and changes in the availability of private health insurance benefits for same day patients (AIHW 1996a).

Same day separations have been distinguished from other separations in this report to illustrate the proportions of total separations which they represent, and also to demonstrate the effect on average lengths of stay when patients receiving this type of hospital care are classified as admitted. In most countries of the Organisation for Economic Co-operation and Development (OECD), same day patients are not admitted and reported average lengths of stay are therefore longer than those calculated for Australia (AIHW 1996a).

In Australia in 1996–97, a total of 2,380,191 separations were on a same day basis, an increase of 9% compared with 1995–96, 21% compared with 1994–95 and 40% compared with 1993–94. These separations comprised 44.7% of separations overall (compared with 42.4% (2,193,076) in 1995–96) and there were increases in the proportions of same day

patients in both public acute hospitals (from 40% to 42%) and private hospitals (from 49% to 51%).

There was some variation amongst the States and Territories in the proportion of separations which were same day separations. For public acute hospitals, New South Wales had a lower proportion than the national average (40%), whereas the Australian Capital Territory (47%) and the Northern Territory (48%) had markedly higher proportions. In the private sector, New South Wales (57%) and Victoria (52%) reported higher proportions than average. The Australian Capital Territory (38%) and Tasmania (40%) reported lower proportions, reflecting the incomplete coverage of private free-standing day hospital facilities for these two jurisdictions.

Separation rates

The crude separation rate per 1,000 population increased by 0.1% between 1995–96 and 1996–97 for public acute hospitals and by 5.4% for private hospitals (Table 4.1, Figure 4.1). The age-standardised separation rate for all hospitals similarly rose between 1995–96 and 1996–97 (by 1.3%).

Among the States and Territories, the Northern Territory reported the highest crude public acute hospital separation rate in 1996–97 (260.6 per 1,000 population; Table 4.2) and Tasmania reported the lowest (160.8 per 1,000 population). Private hospital separation rates ranged from 55.8 per 1,000 population in the Australian Capital Territory (for which not all same day facilities were included in the database) to 115.5 per 1,000 population in Tasmania. For all hospitals combined, South Australia reported the highest crude separation rate (319.6 per 1,000 population) and Northern Territory the highest age-standardised separation rate (319.3 per 1,000 population), despite its private hospital not being included in the database.

These rates are likely to have been affected by whether or not separate episodes of care within a hospital stay were counted as individual separations. Tasmania and the Australian Capital Territory had not implemented this method of counting in 1996–97 and this would have had the effect of reducing the number of separations and increasing the average length of stay for these jurisdictions in comparison with the others.

The crude separation rate for public psychiatric hospitals varied widely, from 0.4 per 1,000 population in Victoria, to 3.1 per 1,000 population in South Australia. This variation reflects differences in the extent to which public psychiatric services have been mainstreamed into public acute hospitals.

Average cost weight of separations

In Table 4.2, average cost weights are presented for 1996–97 based on the cost weights for the version 3.1 Australian National Diagnosis Related Group (AN-DRG) into which each separation was classified on the basis of demographic and clinical characteristics of the patient. The average cost weight information provides a guide to the relative complexity and resource use of admissions within hospitals, with a value of 1.00 representing the theoretical average for all separations.

Separations were only included where the type of episode of care was reported as ‘acute’, or was not reported. Thus separations which were for rehabilitation, palliative care, non-acute care, other care and unqualified neonates (and public psychiatric hospital separations in Western Australia, for which AN-DRG information was not available) were excluded. Separate private and public sector cost weights were used, as they reflect the differing cost structures of the two sectors. Average cost weights cannot therefore be compared between the sectors. Public sector cost weights were used for the rows for ‘Public acute and private

hospitals' and 'Total'. Further information about the AN-DRG classification and cost weights is included in Chapter 10.

Table 4.2 indicates that, within the public sector, most States and Territories had average cost weights close to the national average for public acute hospitals. The Northern Territory was the only exception, with an average cost weight of 0.80. This reflects the high proportion (30%) of separations in the Northern Territory that were for *Admit for renal dialysis* (AN-DRG 572), an AN-DRG with a low relative cost weight (see Chapter 10). Overall, public psychiatric hospital separations had markedly higher cost weights than public acute hospitals, reflecting, at least in part, the longer average lengths of stay in these hospitals.

The validity of comparisons of average cost weights is limited by differences in the extent to which each jurisdiction's psychiatric services are integrated into its public hospital system. For example, in Victoria, almost all public psychiatric hospitals are now mainstreamed and are therefore included in the public acute hospital data. Cost weights are of little use as a measure of resource requirements for these services because the relevant AN-DRGs are much less homogeneous than for other acute services.

The average cost weight for private free-standing day hospitals was markedly lower (0.54) than for other private hospitals (1.01), reflecting the lesser complexity and day-only nature of most admissions in these hospitals. The average cost weights did not differ markedly among the States and Territories.

Patient days

In contrast with the increases in separations, there were decreases in patient days reported for both public acute (2.7%, 425,464) and private (1.0%, 58,412) hospitals in 1996–97 compared with 1995–96. Patient days for public acute and private hospitals combined decreased by 2.3% (483,876) and for all hospitals combined it decreased by 0.4% (81,854). Among the jurisdictions, Queensland reported the largest decline in patient days in public acute hospitals (9.0%, 248,072; see *Australian Hospital Statistics 1995–96*); however, about 50% of this was accounted for by a decline in patient days for nursing home type patients. In 1995–96, counting of episodes of care within a hospital stay as individual separations was implemented, and nursing home type patients were statistically separated, causing an inflated number of patient days reported for Queensland for that year.

Public psychiatric hospital patient days increased by 42% (402,022), reflecting the inclusion of separations for Queensland public psychiatric hospitals for the first time in 1996–97. With Queensland and Victoria (see below) excluded, 729,257 patient days were reported, a reduction of 23% (197,075) compared with the previous year. Crude rates for 1996–97 ranged from 4.8 patient days per 1,000 population in Victoria to 177.7 per 1,000 in Queensland. However, the number of patient days was not able to be supplied for 407 separations from Victorian public psychiatric hospitals (as leave days could not be distinguished), so these separations have been excluded in reports of patient days and in the calculation of average lengths of stay reported in this chapter and elsewhere in this report.

The number of patient days per 1,000 population in 1996–97 fell by 3.6% for public acute and private hospitals combined compared with 1995–96. Public acute hospital patient days per 1,000 fell by 4.1%, with those for private hospitals decreasing by 2.4%.

Of the States and Territories, the Northern Territory reported the highest number of patient days per 1,000 population for public acute hospitals in 1996–97 (982.7 per 1,000 population) and the Australian Capital Territory reported the lowest (728.1 per 1,000 population). The highest crude population rate for patient days in private hospitals was reported by

Tasmania (421.3 per 1,000 population). Age-standardised, the highest rate was reported by Tasmania (1309.2 per 1,000 population) and the lowest by Western Australia (1076.9 per 1,000 population).

Average length of stay

The average length of stay for public acute and private hospitals combined was 4.0 days, a reduction from 4.2 days in 1995–96, reflecting the increases in same day separations and a continuation of the trend suggested by the data over the last few years (Figure 4.2). For public acute hospitals, there was a decrease from 4.4 days in 1995–96 to 4.2 days in 1996–97, and decreases for both public and private patients. For private hospitals, the average length of stay was 3.5 days in 1996–97, a reduction from 3.7 days in the previous year. The average length of stay for public psychiatric hospitals increased from 52.1 days to 67.7 days. This reflects the long average length of stay for Queensland public psychiatric hospitals which were included in the database for the first time for 1996–97.

Tasmania reported the longest average length of stay for public acute hospitals (5.1 days) and the Northern Territory reported the shortest (3.8 days). For private hospitals other than freestanding day hospital facilities, Queensland reported the longest average length of stay (4.1 days) and New South Wales and the Australian Capital Territory reported the shortest (3.6 days).

With same day separations excluded (as is the practice in most OECD countries), average lengths of stay have not reduced as markedly over the last few years. The average length of stay for 1996–97 was shorter than in 1995–96 for public acute hospitals (6.5 days compared with 6.6 days). It was also shorter for private hospitals than in 1995–96 (6.0 days compared with 6.4 days), but the same as for 1994–95. These figures are within the range of those reported for 1995 average lengths of stay for acute care for other OECD countries (OECD 1997).

Admitted patients by public hospital program areas

Data on the number of separations and patient days spent in public hospitals, by type of admitted patient episode, are provided in Tables 4.3 and 4.4. The type of admitted patient episode classifies separations and patient days into the broad programs of health care, rather than providing a detailed casemix profile. Detailed information on patient diagnoses and procedures and on the Australian National Diagnosis Related Groups of admitted patient episodes are provided in later chapters (see Chapters 7, 8 and 10).

Public hospitals reported 3,643,351 separations for 1996–97. By far, the majority of separations were for medical/surgical and obstetric procedures, which accounted for 79% of all separations. The next most frequent separation categories were for dialysis and endoscopy, which accounted for nearly 10% and 3% of all separations respectively.

However, Table 4.4, which provides information on the number of patient days spent in public hospitals by type of episode, shows a different picture. Over 16.6 million patient days were reported for public hospitals in 1996–97. Medical/surgical and obstetric separations again accounted for the majority of patient days (68%). However, mental health separations, which accounted for 3% of separations, accounted for nearly 12% of all patient days. Other episode types which showed high average lengths of stay (as derived from Tables 4.3 and 4.4) include: intellectual handicap, nursing home type patients, rehabilitation, and non-medical/social patients. Dialysis and endoscopy had relatively short average lengths of stay (1.0 day and 2.3 days nationally), and thus accounted for relatively fewer patient days.

Non-admitted patients in public hospitals

Information on non-admitted patient occasions of service delivered by Australian public acute and psychiatric hospitals is provided in Table 4.5. Thirty-two million non-admitted patient occasions of service were delivered through Australian public acute hospitals in 1996–97. The majority of these were ‘other medical/surgical/obstetric’ encounters (36% of all services), followed by ‘emergency services’ (16%) and ‘pathology’ (11%). ‘Allied health’ and ‘community health’ were also frequently provided services— together accounting for 15% of non-admitted patient services. These categories include services such as: physiotherapy, speech therapy, dietary advice, baby clinics, aged care assessment teams and immunisation clinics.

A further 314,643 group sessions were delivered through public acute hospitals. These services include group activities conducted in the same areas against which individual non-admitted patient activity is recorded. A group is defined as two or more patients, but excludes services to two or more family members, which are treated as services provided to an individual. Because of the inconsistent reporting of group sessions against the sub-categories, the total number of sessions only is reported.

Some caution should be taken in interpreting this table, however, as there is considerable variation in practices amongst States and Territories in the way in which non-admitted patient occasions of service data are collected. In particular, New South Wales does not collect information against some service categories and does not separate diagnostic services into ‘pathology’ and ‘radiology and organ imaging’, although these have been able to be estimated. Likewise, South Australian hospitals reported non-admitted patient services against a different set of categories that are not consistent with those used by other States and Territories. Categories for which there is no equivalent category are reported as ‘not applicable’ for both New South Wales and South Australia.

Differing admission practices between the States and Territories will also produce variation between jurisdictions in the services listed in Table 4.5. For example, all dialysis patients in some States and Territories are treated as admitted patients, while other jurisdictions may treat at least some dialysis patients as non-admitted patients. States may also differ in the extent to which these types of services are provided in non-hospital settings (such as community health centres), which is beyond the scope of this data collection.

Data on the number of non-admitted patient occasions of service provided through public psychiatric hospitals are also requested, although data collection in this area is poor. A total of 538,538 services were provided in New South Wales and Queensland, the only States for which these data have been supplied. These services include ‘emergency and outpatient’ care and ‘outreach/community’ care provided to individuals or groups. Information collected for these hospitals is not disaggregated further due to the restricted range of services usually provided through psychiatric hospitals. Data were unavailable for Victoria, Western Australia, South Australia and Tasmania.

Table 4.1: Summary of separation, same day separation, patient day and average length of stay statistics, all hospitals, Australia, 1991–92 to 1996–97

	1991–92	1992–93 ^(a)	1993–94 ^(b)	1994–95 ^(b)	1995–96 ^(c)	1996–97
Separations ('000)						
Public acute hospitals ^(d)	2,937	3,108	3,301	3,443	3,568	3,622
Public patients ^(e)	2,132	n.a.	2,562	2,724	2,963	3,058
Private patients	n.a.	n.a.	545	489	438	393
Public psychiatric hospitals ^(f)	n.a.	n.a.	n.a.	n.a.	25	20
Private hospitals ^(g)	1,210	1,238	1,313	1,460	1,577	1,685
Public acute & private hospitals ^(h)	4,147	4,346	4,614	4,903	5,146	5,307
Total	4,147	4,346	4,614	4,903	5,171	5,327
Same day separations ('000)						
Public acute hospitals ^(d)	861	n.a.	1,129	1,291	1,419	1,520
Public patients ^(e)	n.a.	n.a.	895	1,039	1,197	1,302
Private patients	n.a.	n.a.	181	178	168	160
Public psychiatric hospitals ^(f)	n.a.	n.a.	n.a.	n.a.	1	1
Private hospitals ^(g)	410	n.a.	568	673	772	859
Public acute & private hospitals ^(h)	1,271	n.a.	1,697	1,946	2,192	2,379
Total	1,271	n.a.	1,697	1,964	2,192	2,380
Same day separations as a % of total						
Public acute hospitals ^(d)	29.3	n.a.	34.2	37.5	39.8	42.0
Public patients ^(e)	n.a.	n.a.	34.9	38.1	40.4	42.6
Private patients	n.a.	n.a.	33.2	36.4	38.4	40.9
Public psychiatric hospitals ^(f)	n.a.	n.a.	n.a.	n.a.	5.5	3.9
Private hospitals ^(g)	33.9	n.a.	43.3	46.1	48.9	51.0
Public acute & private hospitals ^(h)	30.6	n.a.	36.8	40.1	42.5	44.8
Total	30.6	n.a.	36.8	40.1	42.4	44.7
Separations per 1,000 population⁽ⁱ⁾						
Public acute hospitals ^(d)	167.7	176.9	186.0	192.0	196.4	196.6
Public patients ^(e)	121.8	n.a.	144.4	151.9	163.1	166.0
Private patients	n.a.	n.a.	30.7	27.3	24.1	21.3
Public psychiatric hospitals ^(f)	n.a.	n.a.	n.a.	n.a.	1.7	1.1
Private hospitals ^(g)	69.1	70.5	74.7	82.2	87.7	92.4
Public acute & private hospitals ^(h)	236.8	247.3	260.0	273.5	283.2	288.0
Total	236.8	247.3	260.0	273.5	284.6	289.1
Total (age-standardised)⁽ⁱ⁾	n.a.	n.a.	257.8	269.1	279.1	282.7
Patient days ('000)						
Public acute hospitals ^(d)	15,205	16,035	16,878	16,416	15,607	15,181
Public patients ^(e)	10,872	n.a.	12,962	12,766	12,608	12,494
Private patients	4,333	n.a.	2,545	2,201	1,878	1,622
Public psychiatric hospitals ^(f)	n.a.	n.a.	n.a.	n.a.	948	1,350
Private hospitals ^(g)	4,845	4,955	5,117	5,407	5,893	5,834
Public acute & private hospitals ^(h)	20,050	20,990	21,995	21,823	21,499	21,015
Total	20,050	20,990	21,995	21,823	22,448	22,366
Patient days per 1,000 population⁽ⁱ⁾						
Public acute hospitals ^(d)	868.2	912.5	951.2	915.6	859.1	824.1
Public patients ^(e)	620.8	n.a.	730.5	712.0	694.1	678.2
Private patients	247.4	n.a.	143.4	122.8	103.4	88.0
Public psychiatric hospitals ^(f)	n.a.	n.a.	n.a.	n.a.	91.8	73.3
Private hospitals ^(g)	276.6	282.0	291.2	304.5	327.6	319.9
Public acute & private hospitals ^(h)	1,144.8	1,194.5	1,239.6	1,217.2	1,183.5	1,140.7
Total	1,144.8	1,194.5	1,239.6	1,217.2	1,235.7	1,214.0
Total (age-standardised)⁽ⁱ⁾	n.a.	n.a.	1,217.5	1,187.0	1,187.9	1,161.4

(continued)

Table 4.1 (continued): Summary of separation, same day separation, patient day and average length of stay statistics, all hospitals, Australia, 1991–92 to 1996–97

	1991–92	1992–93 ^(a)	1993–94 ^(b)	1994–95 ^(b)	1995–96 ^(c)	1996–97
Average length of stay (days)						
Public acute hospitals ^(d)	5.2	5.2	5.1	4.8	4.4	4.2
Public patients ^(e)	5.1	n.a.	5.1	4.7	4.3	4.1
Private patients	n.a.	n.a.	4.7	4.5	4.3	4.1
Public psychiatric hospitals ^(f)	n.a.	n.a.	n.a.	n.a.	52.1	67.7
Private hospitals ^(g)	4.0	4.0	3.9	3.7	3.7	3.5
Public acute & private hospitals ^(h)	4.8	4.8	4.8	4.5	4.2	4.0
Total	4.8	4.8	4.8	4.5	4.3	4.2
Average length of stay, excluding same day separations (days)						
Public acute hospitals ^(d)	6.9	n.a.	7.3	7.0	6.6	6.5
Public patients ^(e)	n.a.	n.a.	7.2	7.0	6.5	6.4
Private patients	n.a.	n.a.	6.5	6.5	6.3	6.3
Public psychiatric hospitals ^(f)	n.a.	n.a.	n.a.	n.a.	54.4	70.5
Private hospitals ^(g)	5.5	n.a.	6.1	6.0	6.4	6.0
Public acute & private hospitals ^(h)	6.5	n.a.	7.0	6.8	6.5	6.4
Total	6.5	n.a.	7.0	6.8	6.8	6.8

- (a) Data for 1992–93 are provisional. They have been updated since previously published, incorporating revised data supplied by New South Wales.
- (b) For 1993–94 and 1994–95 Victorian private hospital data are incomplete. About 81% of 1993–94 separations and 98% of 1994–95 separations were included.
- (c) Data for 1995–96 have been updated since published in *Australian Hospital Statistics 1995–96*, reflecting changes to New South Wales data and exclusion of some non-acute New South Wales facilities.
- (d) Includes the Department of Veterans' Affairs hospitals.
- (e) Although public and private patients account for the bulk of separations from public hospitals, there are also separations for other categories of patients, as detailed in Table 5.1.
- (f) Public psychiatric hospital data were not included until 1995–96, and that year Queensland was unable to report. Victoria was not able to provide patient days data for all separations in 1995–96 and for 407 separations in 1996–97, as leave days could be identified.
- (g) Includes private psychiatric hospitals and private free-standing day hospital facilities.
- (h) Excludes public psychiatric hospitals.
- (i) Figures are crude rates per 1,000 population at 31 December of the relevant year or, if indicated as such, directly age-standardised to the Australian population at 30 June 1991. For public psychiatric hospitals and private hospitals, rates were derived using populations of the reporting States and Territories only, without adjustment for incomplete reporting.
- n.a. not available.

Table 4.2: Summary of separation, same day separation, average cost weight, patient day and average length of stay statistics, all hospitals, States and Territories, 1996–97

	NSW	Vic ^(a)	Qld	WA	SA	Tas	ACT	NT	Total
Separations									
Public hospitals ^(b)	1,236,075	899,897	648,516	347,061	329,190	76,752	56,198	48,278	3,641,967
Public acute hospitals	1,226,986	898,281	646,427	344,546	324,660	76,229	56,198	48,278	3,621,605
Public psychiatric hospitals	9,089	1,616	2,089	2,515	4,530	523	..	..	20,362
Private hospitals ^(c)	522,868	458,554	362,299	126,616	142,644	54,749	17,218	n.a.	1,684,948
Private free-standing day hospital facilities	114,247	42,454	46,512	9,345	7,836	1,004	n.a.	..	221,398
Other private hospitals	408,621	416,100	315,787	117,271	134,808	53,745	17,218	n.a.	1,463,550
Public acute & private hospitals ^(d)	1,749,854	1,356,835	1,008,726	471,162	467,304	130,978	73,416	48,278	5,306,553
Total	1,758,943	1,358,451	1,010,815	473,677	471,834	131,501	73,416	48,278	5,326,915
Same day separations									
Public hospitals ^(b)	484,734	403,402	269,260	144,136	137,068	32,467	26,654	23,186	1,520,907
Public acute hospitals	484,293	403,290	269,201	144,092	136,930	32,462	26,654	23,186	1,520,108
Public psychiatric hospitals	441	112	59	44	138	5	..	..	799
Private hospitals ^(c)	297,442	239,970	177,829	56,372	59,511	21,635	6,525	n.a.	859,284
Private free-standing day hospital facilities	112,421	42,442	46,512	9,342	7,836	985	n.a.	..	219,538
Other private hospitals	185,021	197,528	131,317	47,030	51,675	20,650	6,525	n.a.	639,746
Public acute & private hospitals ^(d)	781,735	643,260	447,030	200,464	196,441	54,097	33,179	23,186	2,379,392
Total	782,176	643,372	447,089	200,508	196,579	54,102	33,179	23,186	2,380,191
Same day separations as a % of total									
Public hospitals ^(b)	39.2	44.8	41.5	41.5	41.6	42.3	47.4	48.0	41.8
Public acute hospitals	39.5	44.9	41.6	41.8	42.2	42.6	47.4	48.0	42.0
Public psychiatric hospitals	4.9	6.9	2.8	1.7	3.0	1.0	..	..	3.9
Private hospitals ^(c)	56.9	52.3	49.1	44.5	41.7	39.5	37.9	n.a.	51.0
Private free-standing day hospital facilities	98.4	100.0	100.0	100.0	100.0	98.1	n.a.	..	99.2
Other private hospitals	45.3	47.5	41.6	40.1	38.3	38.4	37.9	n.a.	43.7
Public acute & private hospitals ^(d)	44.7	47.4	44.3	42.5	42.0	41.3	45.2	48.0	44.8
Total	44.5	47.4	44.2	42.3	41.7	41.1	45.2	48.0	44.7
Separations per 1,000 population^(e)									
Public hospitals ^(b)	198.1	196.4	192.4	194.8	223.0	161.9	182.2	260.6	197.7
Public acute hospitals	196.6	196.1	191.7	193.4	219.9	160.8	182.2	260.6	196.6
Public psychiatric hospitals	1.5	0.4	0.6	1.4	3.1	1.1	..	..	1.1
Private hospitals ^(c)	83.8	100.1	107.5	71.1	96.6	115.5	55.8	n.a.	92.4
Private free-standing day hospital facilities	18.3	9.3	13.8	5.2	5.3	2.1	n.a.	..	12.2
Other private hospitals	65.5	90.8	93.7	65.8	91.3	113.4	55.8	n.a.	80.2
Public acute & private hospitals ^(d)	280.4	296.2	299.2	264.4	316.6	276.3	238.0	260.6	288.0
Total	281.8	296.5	299.8	265.8	319.6	277.4	238.0	260.6	289.1
Total (age-standardised)	272.0	285.8	299.5	270.0	302.0	269.8	260.8	319.3	282.7

(continued)

Table 4.2 (continued): Summary of separation, same day separation, average cost weight, patient day and average length of stay statistics, all hospitals, States and Territories, 1996-97

	NSW	Vic ^(a)	Qld	WA	SA	Tas	ACT	NT	Total
Average cost weight of separations ^(f)									
Public hospitals ^(b)	1.04	1.04	0.99	0.97	1.03	1.03	0.97	0.80	1.02
Public acute hospitals	1.04	1.04	0.98	0.97	1.03	1.03	0.97	0.80	1.02
Public psychiatric hospitals	1.30	1.34	1.52	n.a.	1.53	0.95	..	..	1.37
Private hospitals ^(c)	0.91	0.96	0.96	0.92	0.99	0.97	1.00	n.a.	0.94
Private free-standing day hospital facilities	0.53	0.48	0.59	0.50	0.73	0.75	n.a.	..	0.54
Other private hospitals	1.02	1.01	1.01	0.95	1.00	0.97	1.00	n.a.	1.01
Public acute & private hospitals ^(d)	1.00	1.01	0.98	0.96	1.01	1.00	0.98	0.80	0.99
Total	1.00	1.01	0.98	0.96	1.02	1.00	0.98	0.80	1.00
Patient days									
Public hospitals ^(b)	5,910,746	3,711,677	3,120,439	1,448,666	1,466,323	467,159	224,630	182,087	16,531,727
Public acute hospitals	5,524,030	3,689,576	2,521,352	1,324,656	1,327,047	387,904	224,630	182,087	15,181,282
Public psychiatric hospitals	386,716	22,101	599,087	124,010	139,276	79,255	..	..	1,350,445
Private hospitals ^(c)	1,595,633	1,670,561	1,332,740	439,683	533,802	199,742	61,937	n.a.	5,834,098
Private free-standing day hospital facilities	114,258	42,454	46,512	9,407	7,836	1,048	n.a.	..	221,515
Other private hospitals	1,481,375	1,628,107	1,286,228	430,276	525,966	198,694	61,937	n.a.	5,612,583
Public acute & private hospitals ^(d)	7,119,663	5,360,137	3,854,092	1,764,339	1,860,849	587,646	286,567	182,087	21,015,380
Total	7,506,379	5,382,238	4,453,179	1,888,349	2,000,125	666,901	286,567	182,087	22,365,825
Patient days per 1,000 population ^(e)									
Public hospitals ^(b)	947.1	810.2	925.5	813.0	993.3	985.4	728.1	982.7	897.4
Public acute hospitals	885.1	805.4	747.9	743.4	899.0	818.2	728.1	982.7	824.1
Public psychiatric hospitals	62.0	4.8	177.7	69.6	94.3	167.2	..	..	73.3
Private hospitals ^(c)	255.7	364.7	395.3	246.7	361.6	421.3	200.8	n.a.	319.9
Private free-standing day hospital facilities	18.3	9.3	13.8	5.3	5.3	2.2	n.a.	..	12.2
Other private hospitals	237.4	355.4	381.5	241.5	356.3	419.1	200.8	n.a.	307.8
Public acute & private hospitals ^(d)	1,140.8	1,170.0	1,143.2	990.1	1,260.6	1,239.6	928.9	982.7	1,140.7
Total	1,202.8	1,174.8	1,320.9	1,059.7	1,354.9	1,406.8	928.9	982.7	1,214.0
Total (age-standardised)	1,128.4	1,097.1	1,309.1	1,076.9	1,202.2	1,309.2	1,103.0	1,273.9	1,161.4
Average length of stay (days)									
Public hospitals ^(b)	4.8	4.1	4.8	4.2	4.5	6.1	4.0	3.8	4.5
Public acute hospitals	4.5	4.1	3.9	3.8	4.1	5.1	4.0	3.8	4.2
Public psychiatric hospitals	42.5	13.7	286.8	49.3	30.7	151.5	..	..	67.7
Private hospitals ^(c)	3.1	3.6	3.7	3.5	3.7	3.6	3.6	n.a.	3.5
Private free-standing day hospital facilities	1.0	1.0	1.0	1.0	1.0	1.0	n.a.	..	1.0
Other private hospitals	3.6	3.9	4.1	3.7	3.9	3.7	3.6	n.a.	3.8
Public acute & private hospitals ^(d)	4.1	4.0	3.8	3.7	4.0	4.5	3.9	3.8	4.0
Total	4.3	4.0	4.4	4.0	4.2	5.1	3.9	3.8	4.2

(continued)

Table 4.2 (continued): Summary of separation, same day separation, average cost weight, patient day and average length of stay statistics, all hospitals, States and Territories, 1996–97

	NSW	Vic ^(b)	Qld	WA	SA	Tas	ACT	NT	Total
Average length of stay, excluding same day separations (days)									
Public hospitals ^(b)	7.2	6.7	7.5	6.4	6.9	9.8	6.7	6.3	7.1
Public acute hospitals	6.8	6.6	6.0	5.9	6.3	8.1	6.7	6.3	6.5
Public psychiatric hospitals	44.7	20.0	295.1	50.2	31.7	153.0	..	..	70.5
Private hospitals ^(c)	5.8	6.5	6.3	5.5	5.7	5.4	5.2	n.a.	6.0
Private free-standing day hospital facilities	1.0	1.0	..	21.7	..	3.3	n.a.	..	1.1
Other private hospitals	5.8	6.5	6.3	5.5	5.7	5.4	5.2	n.a.	6.0
Public acute & private hospitals ^(c)	6.5	6.6	6.1	5.8	6.1	6.9	6.3	6.3	6.4
Total	6.9	6.6	7.1	6.2	6.6	7.9	6.3	6.3	6.8

(a) For 407 records in public psychiatric hospitals, patient days were not reported as leave days were not identified. These separations were not included in counts of patient days or calculations for average length of stay.

(b) Includes the Department of Veterans' Affairs hospitals in New South Wales.

(c) Includes private psychiatric hospitals.

(d) Excludes public psychiatric hospitals.

(e) Figures are crude rates per 1,000 population at 31 December 1996 or, if indicated as such, directly age-standardised to the Australian population at 30 June 1991. In the *Total* column, the rates for private hospitals were derived using populations of the reporting States and Territories only, without adjustment for incomplete reporting.

(f) Separations for which the type of episode of care was reported as acute, or was not reported. For further details, see Chapter 10. Public national cost weights were used for the *Public acute and private hospitals* and *Total* rows.

.. not applicable.

n.a. not available.

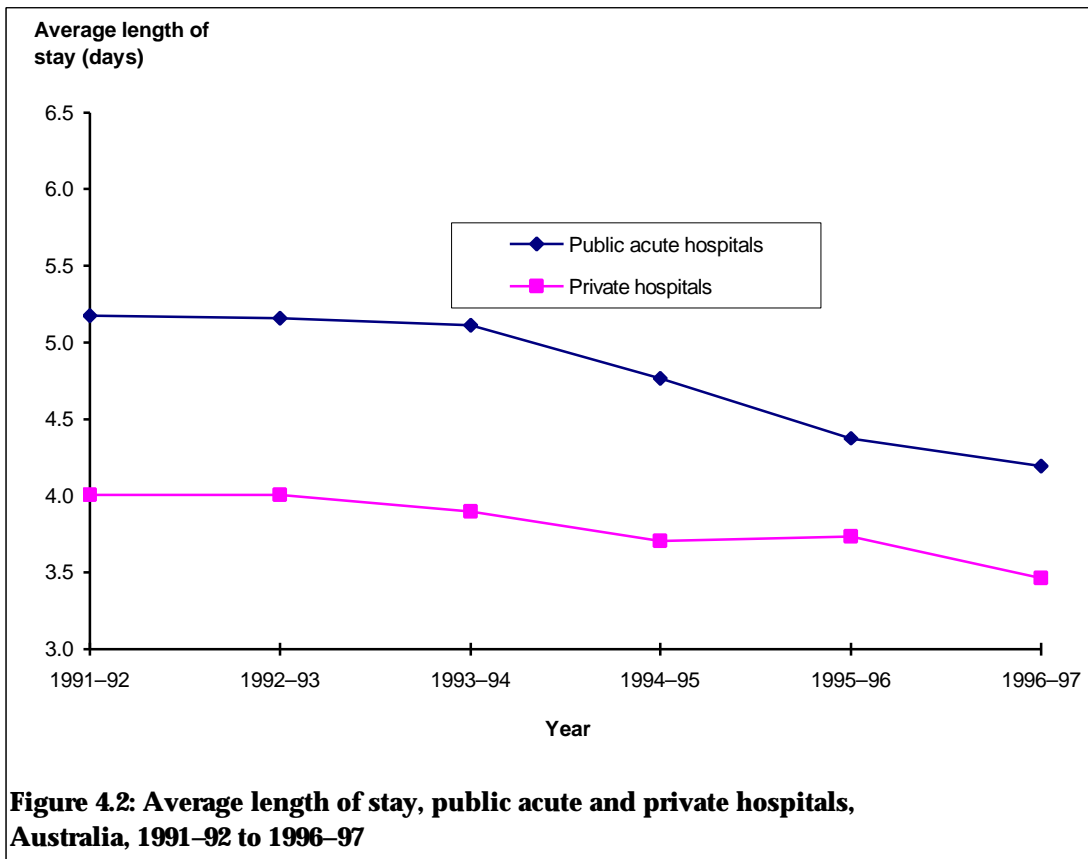
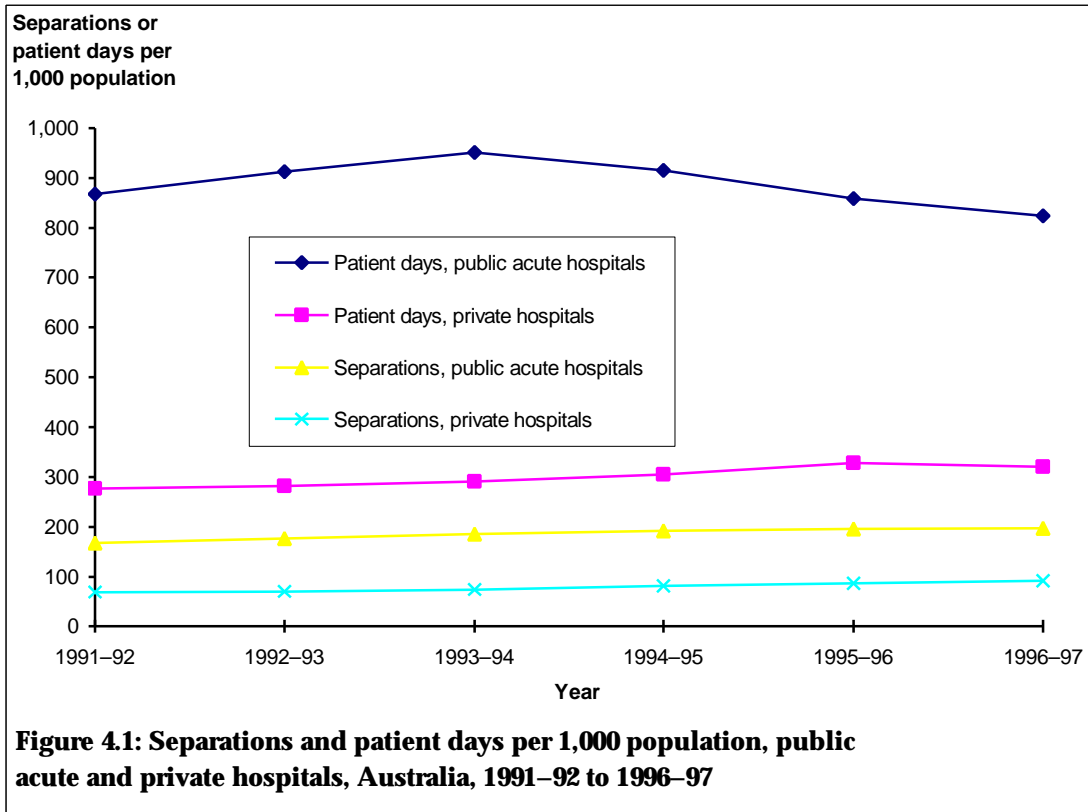


Table 4.3: Separations by type of admitted patient episode, public acute and psychiatric hospitals, States and Territories, 1996–97

Type of admitted patient episode	NSW	Vic	Qld	WA	SA	Tas	ACT	NT ^(a)	Total
Mental health	41,523	22,370	21,391	15,818	11,899	2,767	1,384	779	117,931
Alcohol & drug	7,855	3,183	5,308	2,774	718	317	91	211	20,457
Nursing home type	8,309	2,389	1,814	96	929	313	53	44	13,947
Rehabilitation	27,014	12,677	7,277	4,566	3,224	515	114	268	55,655
Intellectual handicap	37	45	72	23	19	12	0	n.a.	208
Dental	5,577	6,397	5,502	3,068	2,819	728	671	407	25,169
Non-medical & social	1,722	2,350	2,824	1,928	817	390	46	269	10,346
Dialysis	104,611	97,243	52,692	33,018	27,666	7,431	9,696	14,542	346,899
Endoscopy	51,148	4,034	25,288	15,329	16,049	4,207	2,824	1,190	120,069
Perinatal	14,087	9,211	7,285	2,432	1,792	689	1,337	825	37,658
Medical/surgical/obstetrics	974,525	738,534	519,054	267,946	263,289	59,186	42,727	29,751	2,895,012
Total separations	1,236,408	898,433	648,507	346,998	329,221	76,555	58,943	48,286	3,643,351

(a) Intellectual handicap separations are included in rehabilitation.
n.a. not available.

Table 4.4: Patient days by type of admitted patient episode, public acute and psychiatric hospitals, States and Territories, 1996–97

Type of admitted patient episode	NSW	Vic	Qld	WA	SA	Tas	ACT	NT ^(a)	Total
Mental health	537,404	379,586	585,376	204,215	161,219	61,430	19,344	8,392	1,956,966
Alcohol & drug	49,664	16,991	77,043	21,598	6,451	4,065	709	894	177,415
Nursing home type	540,754	90,876	156,697	22,635	174,242	73,060	4,029	6,754	1,069,047
Rehabilitation	404,650	333,714	59,242	67,663	91,272	13,049	10,078	7,338	987,006
Intellectual handicap	670	538	54,502	101	168	11,847	0	n.a.	67,826
Dental	7,239	7,251	6,537	3,612	3,364	819	1,132	563	30,517
Non-medical & social	24,715	28,965	33,474	10,419	6,605	6,478	3,872	1,436	115,964
Dialysis	105,189	97,348	52,801	33,094	27,725	7,476	9,696	14,585	347,914
Endoscopy	124,757	7,532	59,856	32,424	35,186	8,745	7,602	2,923	279,025
Perinatal	126,823	81,573	65,448	28,829	29,717	7,223	11,424	10,283	361,320
Medical/surgical/obstetrics	4,122,322	2,682,119	1,925,669	1,021,797	984,513	257,881	172,845	128,945	11,296,091
Total patient days	6,044,187	3,726,493	3,076,645	1,446,387	1,520,462	452,073	240,731	182,113	16,689,091

(a) Intellectual handicap patient days are included in rehabilitation.
n.a. not available.

Table 4.5: Non-admitted patient occasions of service, by type of non-admitted patient care, public acute and psychiatric hospitals, States and Territories, 1996–97

Type of non-admitted patient care	NSW ^(a)	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(b)
Public acute hospitals									
Accident & emergency	1,627,291	1,097,554	979,254	705,134	433,711	56,102	75,188	108,200	5,082,434
Dialysis	1,833	..	1,833	..	..	..	..	..	1,833
Pathology	1,827,836	663,250	871,803	..	..	48,305	29,263	58,852	3,499,309
Radiology & organ imaging	577,212	454,784	585,177	238,506	263,640	18,588	52,941	64,595	2,255,443
Endoscopy & related procedures	..	..	1,711	..	..	..	3,510	..	5,221
Other medical/surgical/obstetric	5,767,420	1,272,802	2,183,887	1,384,203	678,109	121,052	166,880	63,942	11,638,295
Mental health	121,431	775,397	119,476	..	25,115	..	4,803	..	1,046,222
Alcohol & drug	..	60,597	87,293	..	..	..	..	..	147,890
Dental	..	225,186	530,050	..	13,279	2,006	..	1,005	771,526
Pharmacy	392,597	386,986	688,973	..	..	24,469	505	6,293	1,499,823
Allied health	..	958,651	594,122	409,416	410,793	66,147	49,520	15,755	2,504,404
Community health	1,686,440	456,480	118,568	..	..	..	..	..	2,261,488
District nursing	..	483,967	31,964	..	..	..	..	..	515,931
Other outreach	..	45,444	64,961	..	446,707	..	10,342	..	567,454
Not reported	..	..	..	..	..	233,725	..	..	233,725
Total services	12,000,227	6,881,098	6,859,072	2,737,259	2,271,354	570,394	392,952	318,642	32,030,998
Group sessions	183,453	46,332	54,399	10,622	8,822	n.a.	10,835	0	314,463
Public psychiatric hospitals									
Emergency & outpatient individual sessions	47,282	n.a.	19,517	n.a.	n.a.	n.a.	..	..	66,799
Emergency & outpatient group sessions	3,141	n.a.	2,193	n.a.	n.a.	n.a.	..	..	5,334
Outreach/community individual sessions	342,264	n.a.	111,193	n.a.	n.a.	n.a.	..	..	453,457
Outreach/community group sessions	8,354	n.a.	4,594	n.a.	n.a.	n.a.	..	..	12,948
Total services	401,041	n.a.	137,497	n.a.	n.a.	n.a.	..	..	538,538

(a) Occasions of service for pathology and radiology and organ imaging were available as a combined total only. The proportions of services allocated to these categories have been estimated.

(b) For public psychiatric hospitals, includes only those States and Territories for which data are available.

n.a. not available.

.. not applicable.