

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 included on the number of separations for patients and their aggregated and average lengths of stay, presented on the basis of the sector of the hospital (public or private) and the type of hospital within the sector. 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 1993–94 to 1997–98 and Table 4.2 reports the statistics for 1997–98 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 1997–98, the hospital sectors and types included are public acute hospitals, public psychiatric hospitals, private free-standing day facilities and other private hospitals. Data are also presented for all public hospitals combined, 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 for public hospitals from the National Public Hospital Establishments Database by type of admitted patient episode. The categories in this table (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 3).

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.

Admitted patients by sector and hospital type

Separations

There were 5,563,074 separations reported from public and private acute and psychiatric hospitals in 1997–98 (Table 4.2), an increase of 236,159 (4.4%) compared with 1996–97 (Table 4.1). Public hospital separations increased by 3.5% (128,131) compared with 1996–97 and there was a 6.4% (108,028) increase in the private sector.

Public patient separations comprised 86% of public acute hospital separations, an increase over the 84% reported in 1996–97, 83% in 1995–96, 80% 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 (22,566) rose by 2,204, an increase of 11% when compared with 1996–97. Note that the scope of data in this report differs from the scope of data for public psychiatric hospitals presented in the *National Mental Health Report 1997* (Commonwealth of Australia 1998) which are extracted from the National Survey of Mental Health Services database.

The private sector accounted for 32.2% of the 5.56 million separations (1,792,976), compared with 31.6% (1,684,948) in 1996–97. Private free-standing day hospital facilities accounted for 248,045 or 14% of private sector separations, compared with 221,398 or 13% in 1996–97.

About the same number of separations were reported for each month of the year, for both the public and private sectors (Figures 4.3 and 4.4). However, the fewest separations were reported for January for both sectors, apparent for both same day and non-same day separations.

Same day separations

1997–98 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.

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 Cooperation 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 1997–98, a total of 2,577,652 separations were on a same day basis, an increase of 8.3% compared with 1996–97 and 52% compared with 1993–94. These separations comprised 46.3% of overall separations (compared with 44.7% (2,380,191) in 1996–97) and there were increases in the proportions of same day patients in both public acute hospitals (from 42.0% to 43.3%) and private hospitals (from 51.0% to 53.1%).

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 (40.4%), whereas the Australian Capital Territory (50.7%) and the Northern Territory (49.1%) had markedly higher proportions. In the private sector, New South Wales (58.7%) and Victoria (54.0%) reported higher proportions than average. The Australian Capital Territory (38.1%) and Tasmania (39.1%)

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 2.3% between 1996–97 and 1997–98 for public acute hospitals and by 5.3% for private hospitals (Table 4.1, Figure 4.1). The age-standardised separation rate for all hospitals similarly rose between 1996–97 and 1997–98 (by 2.8%).

Among the States and Territories, the Northern Territory reported the highest crude public acute hospital separation rate in 1997–98 (278.3 per 1,000 population; Table 4.2) and Tasmania reported the lowest (168.9 per 1,000 population). Private hospital separation rates ranged from 57.2 per 1,000 population in the Australian Capital Territory (for which same day facilities were not included in the database) to 113.3 per 1,000 population in Queensland. For all hospitals combined, South Australia reported the highest crude separation rate (333.4 per 1,000 population) and Northern Territory the highest age-standardised separation rate (340.8 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 (see Glossary) within a hospital stay were counted as individual separations. The Australian Capital Territory and the Tasmanian private sector had not implemented this method of counting in 1997–98 and this would have had the effect of reducing the number of separations and increasing the average length of stay for these hospitals in comparison with the others.

The crude separation rate for public psychiatric hospitals varied widely, from 0.3 per 1,000 population in Victoria, to 2.9 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 1997–98 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. 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 were excluded.

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. Separate private and public sector cost weights were used, as they reflect the differing cost structures of the two sectors. Public sector cost weights were used for the rows for 'Public acute and private hospitals' and 'Total'.

In Table 4.1, average cost weights for 1996–97 are based on AN-DRG version 3.1 and 1996–97 cost weights, and average cost weights for 1995–96 are based on AN-DRG version 3.0 and its corresponding cost weights. Comparisons of average cost weights between the reporting years and between the sectors should therefore be made with caution. 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 0.76. This reflects the high proportion (33%) 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 (0.56) than for other private hospitals (1.02), reflecting the lesser complexity and day-only nature of most admissions in these hospitals. The average cost weights for the 'other' private hospitals did not differ markedly among the States and Territories.

Patient days

Patient days represent the number of full or partial days stay for patients who separated from hospital during the reporting period, and represent the aggregated length of stay for all patients (see Glossary). They have previously been referred to as bed days. A total of 22,565,356 patient days were reported for 1997–98, 73.3% in the public sector and 26.7% in the private sector.

There was a decrease in patient days reported for public acute hospitals (29,649, 0.2%) in 1997–98 compared with 1996–97, but there was an increase reported for private hospitals (170,829, 2.9%). Patient days for public acute and private hospitals combined increased by 0.7% (141,180) and for all hospitals combined, it increased by 0.9% (199,531).

Public psychiatric hospital patient days increased by 4.3% (58,351) nationally. Crude rates for 1997–98 ranged from 7.3 patient days per 1,000 population in Victoria to 160.7 per 1,000 in Queensland.

The number of patient days per 1,000 population in 1997–98 fell by 0.4% for public acute and private hospitals combined compared with 1996–97. Public acute hospital patient days per 1,000 fell by 1.3%, with those for private hospitals increasing by 1.8%. Age-standardised patient days per 1,000 population for all hospitals combined have decreased over the last three years.

Of the States and Territories, the Northern Territory reported the highest number of patient days per 1,000 population for public acute hospitals in 1997–98 (993.4 per 1,000 population) and Tasmania reported the lowest (701.8 per 1,000 population). The highest crude population rate for patient days in private hospitals was reported by Queensland (401.2 per 1,000 population). Age-standardised, the highest rate for all hospitals combined was reported by the Northern Territory (1,313.0 per 1,000 population) and the lowest by Victoria (1084.4 per 1,000 population).

Average length of stay

The average length of stay for public acute and private hospitals combined was 3.8 days, a reduction from 4.0 days in 1996–97, 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 4.2 days in 1996–97 to 4.0 days in 1997–98, and decreases for both public and private patients. For private hospitals, the average length of stay was 3.3 days in 1997–98, a reduction from 3.5 days in the previous year. The average length of stay for public psychiatric hospitals decreased from 67.7 days to 62.4 days.

New South Wales reported the longest average length of stay for public acute hospitals (4.4 days) and the Northern Territory reported the shortest (3.6 days). For private hospitals other than free-standing day hospital facilities, Queensland reported the longest average length of stay (4.0 days) and Western Australian reported the shortest (3.4 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 (Table 4.1, Figure 4.2). The average length of stay for 1997–98 was shorter than in 1996–97 for public acute hospitals (6.4 days compared with 6.5 days). However, for private hospitals, it was the same as in 1996–97 and in 1994–95 (6.0 days). These figures indicate most of the reductions in average length of stay overall are a result of increasing proportions of same day separations, rather than reductions in length of stay for non-same day stays. The average lengths of stay 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 AN-DRGs of admitted patient episodes are provided in later chapters (see Chapters 7, 8 and 10).

Public hospitals reported 3,772,273 separations for 1997–98. By far, the majority of separations were for medical, surgical and obstetrics, which together accounted for 79% of all separations. The next most frequent separation categories were dialysis and Mental health, which accounted for nearly 10% and 3.5% 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 million patient days were reported for public hospitals in 1997–98. Medical, surgical and obstetric separations again dominated, accounting for the majority of patient days (67%). Mental health separations, which accounted for 3.5% of separations, accounted for nearly 12.5% of all patient days. Other episode types which had high average lengths of stay (as derived from Tables 4.3 and 4.4) included intellectual handicap, nursing home type patients, rehabilitation, and non-medical and social patients. Dialysis and endoscopy had relatively short average lengths of stay (1.0 day and 2.2 days), 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.

Over 32 million non-admitted patient occasions of service were delivered to individuals through Australian public acute hospitals in 1997–98. The largest group of these were ‘Other medical/surgical/obstetric’ encounters (37% of the total), followed by ‘Accident and emergency’ services (15.8%) and ‘Pathology’ (10.6%). ‘Allied health’ and ‘Community health’ were also frequently provided services, together accounting for 14.5% 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.

In addition to the services provided to individuals, 468,523 group sessions were delivered through public acute hospitals. These services include group activities conducted in the same areas against which individual non-admitted patient services are recorded. A group service is defined as a service provided to two or more patients, but excludes services provided 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.

Users of these data should note that there is considerable variation in practices amongst States and Territories and between reporting years 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 using 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. Over the last few years, South Australia, Western Australia, Queensland and Tasmania all had changes in reporting arrangements for non-admitted occasions of service. For example, in South Australia the large increase from 8,822 group sessions in 1996–97 to 179,128 group sessions in 1997–98 is due to improved reporting for South Australian country hospitals.

Differing admission practices between the States and Territories will also lead to variation among jurisdictions in the services reported in Table 4.5. States and Territories 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 159,724 services were provided in New South Wales and Queensland, the only States or Territories for which these data have been supplied (Table 4.5). 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.

Table 4.1: Summary of separation, same day separation, average cost weight, patient day and average length of stay statistics, by hospital type, Australia, 1993–94 to 1997–98

	1993–94 ^{(a)(b)}	1994–95 ^{(a)(b)}	1995–96 ^(c)	1996–97	1997–98
Separations ('000)					
Public acute hospitals ^(d)	3,296	3,420	3,568	3,622	3,748
Public patients ^(e)	2,557	2,720	2,963	3,058	3,222
Private patients	545	489	438	393	355
Public psychiatric hospitals ^(f)	n.a.	n.a.	25	20	23
Private hospitals ^(g)	1,313	1,460	1,577	1,685	1,793
Public acute & private hospitals ^(h)	4,609	4,880	5,146	5,307	5,541
Total	4,609	4,880	5,171	5,327	5,563
Same day separations ('000)					
Public acute hospitals ^(d)	1,128	1,290	1,419	1,520	1,622
Public patients ^(e)	894	1,039	1,197	1,302	1,412
Private patients	181	178	168	160	152
Public psychiatric hospitals ^(f)	n.a.	n.a.	1	1	2
Private hospitals ^(g)	568	673	772	859	953
Public acute & private hospitals ^(h)	1,697	1,964	2,192	2,379	2,575
Total	1,697	1,964	2,192	2,380	2,578
Same day separations as a % of total					
Public acute hospitals ^(d)	34.2	37.7	39.8	42.0	43.3
Public patients ^(e)	35.0	38.2	40.4	42.6	43.8
Private patients	33.2	36.5	38.4	40.9	42.7
Public psychiatric hospitals ^(f)	n.a.	n.a.	5.5	3.9	10.6
Private hospitals ^(g)	43.3	46.1	48.9	51.0	53.1
Public acute & private hospitals ^(h)	36.8	40.1	42.5	44.8	46.5
Total	36.8	40.2	42.4	44.7	46.3
Separations per 1,000 population⁽ⁱ⁾					
Public acute hospitals ^(d)	185.6	190.5	196.4	196.6	201.2
Public patients ^(e)	144.0	151.5	163.1	166.0	173.0
Private patients	30.7	27.2	24.1	21.3	19.1
Public psychiatric hospitals ^(f)	n.a.	n.a.	1.7	1.1	1.2
Private hospitals ^(g)	74.7	82.1	87.7	92.4	97.3
Public acute & private hospitals ^(h)	259.5	271.9	283.2	288.0	297.5
Total	259.5	271.9	284.6	289.1	298.7
Total (age-standardised)⁽ⁱ⁾	257.0	268.1	279.1	282.7	290.6
Average cost weight of separations^(j)					
Public acute hospitals ^(d)	n.a.	n.a.	1.04	1.02	1.00
Public patients ^(e)	n.a.	n.a.	1.01	0.99	0.97
Private patients	n.a.	n.a.	1.09	1.08	1.07
Public psychiatric hospitals ^(f)	n.a.	n.a.	1.23	1.37	1.58
Private hospitals ^(g)	n.a.	n.a.	0.95	0.94	0.96
Public acute & private hospitals ^(h)	n.a.	n.a.	1.01	0.99	0.98
Total	n.a.	n.a.	1.01	1.00	0.99
Patient days ('000)					
Public acute hospitals ^(d)	15,907	15,567	15,607	15,181	15,152
Public patients ^(e)	12,029	12,086	12,608	12,494	12,460
Private patients	2,529	2,173	1,878	1,622	1,419
Public psychiatric hospitals ^(f)	n.a.	n.a.	948	1,350	1,409
Private hospitals ^(g)	5,117	5,407	5,893	5,834	6,005
Public acute & private hospitals ^(h)	21,024	20,974	21,499	21,015	21,157
Total	21,024	20,974	22,448	22,366	22,565

(continued)

Table 4.1 (continued): Summary of separation, same day separation, average cost weight, patient day and average length of stay statistics, by hospital type, Australia, 1993–94 to 1997–98

	1993–94 ^{(a)(b)}	1994–95 ^{(a)(b)}	1995–96 ^(c)	1996–97	1997–98
Patient days per 1,000 population⁽ⁱ⁾					
Public acute hospitals ^(d)	895.6	867.2	859.1	824.1	813.6
Public patients ^(e)	677.3	673.3	694.1	678.2	669.0
Private patients	142.4	121.0	103.4	88.0	76.2
Public psychiatric hospitals ^(f)	n.a.	n.a.	91.8	73.3	75.6
Private hospitals ^(g)	291.0	304.1	327.6	319.9	325.8
Public acute & private hospitals ^(h)	1,183.8	1,168.4	1,183.5	1,140.7	1,136.0
Total	1,183.8	1,168.4	1,235.7	1,214.0	1,211.7
Total (age-standardised)⁽ⁱ⁾	1,157.7	1,133.8	1,187.9	1,161.4	1,150.5
Average length of stay (days)					
Public acute hospitals ^(d)	4.8	4.6	4.4	4.2	4.0
Public patients ^(e)	4.7	4.4	4.3	4.1	3.9
Private patients	4.6	4.4	4.3	4.1	4.0
Public psychiatric hospitals ^(f)	n.a.	n.a.	52.1	67.7	62.4
Private hospitals ^(g)	3.9	3.7	3.7	3.5	3.3
Public acute & private hospitals ^(h)	4.6	4.3	4.2	4.0	3.8
Total	4.6	4.3	4.3	4.2	4.1
Average length of stay, excluding same day separations (days)					
Public acute hospitals ^(d)	6.8	6.7	6.6	6.5	6.4
Public patients ^(e)	6.7	6.6	6.5	6.4	6.1
Private patients	6.4	6.4	6.3	6.3	6.2
Public psychiatric hospitals ^(f)	n.a.	n.a.	54.4	-1689.2	69.7
Private hospitals ^(g)	6.1	6.0	6.4	6.0	6.0
Public acute & private hospitals ^(h)	6.6	6.5	6.5	6.4	6.3
Total	6.6	6.5	6.8	6.8	6.7

(a) 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.

(b) Data for 1993–94 and 1994–95 have been updated since published in *Australian Hospital Statistics 1996–97*, reflecting exclusion of some non-hospital New South Wales facilities.

(c) Statistical separations were introduced in 1995–96 and would have resulted in an increase in separations reported for that and subsequent years compared with previous years.

(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 not 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.

(j) 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 & private hospitals* and *Total* rows. AN-DRG version 3.1 was used for 1996–97 and 1997–98 and version 3.0 was used for 1995–96.

n.a. not available.

Table 4.2: Summary of separation, same day separation, average cost weight, patient day and average length of stay statistics, by hospital type, States and Territories, 1997-98

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Separations									
Public hospitals ^(a)	1,272,797	928,847	685,345	346,363	346,782	80,389	57,175	52,400	3,770,098
Public acute hospitals	1,261,314	927,327	683,867	343,164	342,459	79,826	57,175	52,400	3,747,532
Public psychiatric hospitals	11,483	1,520	1,478	3,199	4,323	563	..	..	22,566
Private hospitals ^(b)	544,351	484,201	388,078	160,358	147,420	50,997	17,571	n.a.	1,792,976
Private free-standing day hospital facilities	124,238	46,637	57,028	9,473	9,532	1,137	n.a.	..	248,045
Other private hospitals	420,113	437,564	331,050	150,885	137,888	49,860	17,571	n.a.	1,544,931
Public acute & private hospitals ^(c)	1,805,665	1,411,528	1,071,945	503,522	489,879	130,823	74,746	52,400	5,540,508
Total	1,817,148	1,413,048	1,073,423	506,721	494,202	131,386	74,746	52,400	5,563,074
Same day separations									
Public hospitals ^(a)	511,361	430,182	294,007	148,337	149,435	36,807	28,055	26,545	1,624,729
Public acute hospitals	509,351	430,062	293,978	148,295	149,261	36,792	28,055	26,545	1,622,339
Public psychiatric hospitals	2,010	120	29	42	174	15	..	..	2,390
Private hospitals ^(b)	319,544	261,521	202,144	77,397	65,666	19,950	6,701	n.a.	952,923
Private free-standing day hospital facilities	124,238	46,637	57,028	9,473	9,532	1,137	n.a.	..	248,045
Other private hospitals	195,306	214,884	145,116	67,924	56,134	18,813	6,701	n.a.	704,878
Public acute & private hospitals ^(c)	828,895	691,583	496,122	225,692	214,927	56,742	34,756	26,545	2,575,262
Total	830,905	691,703	496,151	225,734	215,101	56,757	34,756	26,545	2,577,652
Same day separations as a % of total									
Public hospitals ^(a)	40.2	46.3	42.9	42.8	43.1	45.8	49.1	50.7	43.1
Public acute hospitals	40.4	46.4	43.0	43.2	43.6	46.1	49.1	50.7	43.3
Public psychiatric hospitals	17.5	7.9	2.0	1.3	4.0	2.7	..	..	10.6
Private hospitals ^(b)	58.7	54.0	52.1	48.3	44.5	39.1	38.1	n.a.	53.1
Private free-standing day hospital facilities	100.0	100.0	100.0	100.0	100.0	100.0	n.a.	..	100.0
Other private hospitals	46.5	49.1	43.8	45.0	40.7	37.7	38.1	n.a.	45.6
Public acute & private hospitals ^(c)	45.9	49.0	46.3	44.8	43.9	43.4	46.5	50.7	46.5
Total	45.7	49.0	46.2	44.5	43.5	43.2	46.5	50.7	46.3
Separations per 1,000 population^(d)									
Public hospitals ^(a)	202.0	200.7	200.1	191.1	233.9	170.1	186.0	278.3	202.4
Public acute hospitals	200.1	200.3	199.6	189.4	231.0	168.9	186.0	278.3	201.2
Public psychiatric hospitals	1.8	0.3	0.4	1.8	2.9	1.2	..	..	1.2
Private hospitals ^(b)	86.4	104.6	113.3	88.5	99.4	107.9	57.2	n.a.	97.3
Private free-standing day hospital facilities	19.7	10.1	16.6	5.2	6.4	2.4	n.a.	..	13.5
Other private hospitals	66.7	94.5	96.6	83.3	93.0	105.5	57.2	n.a.	83.8
Public acute & private hospitals ^(c)	286.5	304.9	312.9	277.9	330.5	276.8	243.2	278.3	297.5
Total	288.3	305.3	313.3	279.6	333.4	278.0	243.2	278.3	298.7
Total (age-standardised)	277.0	292.8	311.4	282.8	313.0	268.2	266.1	340.8	290.6

(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, 1997–98

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Average cost weight of separations^(e)									
Public hospitals ^(e)	1.02	1.02	0.98	0.96	1.00	0.97	0.97	0.76	1.00
Public acute hospitals	1.02	1.01	0.98	0.95	0.99	0.97	0.97	0.76	1.00
Public psychiatric hospitals	1.42	1.71	1.73	1.76	1.73	1.53	..	..	1.58
Private hospitals ^(f)	0.92	0.96	0.97	0.95	1.00	1.01	1.07	n.a.	0.96
Private free-standing day hospital facilities	0.56	0.51	0.58	0.52	0.79	0.78	n.a.	..	0.56
Other private hospitals	1.03	1.01	1.04	0.98	1.02	1.01	1.07	n.a.	1.02
Public acute & private hospitals ^(g)	0.99	0.99	0.98	0.95	0.99	0.98	0.99	0.76	0.98
Total	0.99	1.00	0.98	0.96	1.00	0.98	0.99	0.76	0.99
Patient days									
Public hospitals ^(e)	5,967,083	3,728,462	3,090,079	1,460,677	1,486,872	396,996	243,244	187,016	16,560,429
Public acute hospitals	5,489,378	3,694,640	2,539,631	1,308,619	1,357,396	331,709	243,244	187,016	15,151,633
Public psychiatric hospitals	477,705	33,822	550,448	152,058	129,476	65,287	..	..	1,408,796
Private hospitals ^(f)	1,641,136	1,684,185	1,374,361	522,636	536,759	180,984	64,866	n.a.	6,004,927
Private free-standing day hospital facilities	124,238	46,637	57,028	9,473	9,532	1,137	n.a.	..	248,045
Other private hospitals	1,516,898	1,637,548	1,317,333	513,163	527,227	179,847	64,866	n.a.	5,756,882
Public acute & private hospitals ^(g)	7,130,514	5,378,825	3,913,992	1,831,255	1,894,155	512,693	308,110	187,016	21,156,560
Total	7,608,219	5,412,647	4,464,440	1,983,313	2,023,631	577,980	308,110	187,016	22,565,356
Patient days per 1,000 population^(h)									
Public hospitals ^(e)	946.8	805.5	902.0	806.1	1,003.0	839.9	791.3	993.4	889.2
Public acute hospitals	871.0	798.2	741.3	722.2	915.7	701.8	791.3	993.4	813.6
Public psychiatric hospitals	75.8	7.3	160.7	83.9	87.3	138.1	..	..	75.6
Private hospitals ^(f)	260.4	363.8	401.2	288.4	362.1	382.9	211.0	n.a.	325.8
Private free-standing day hospital facilities	19.7	10.1	16.6	5.2	6.4	2.4	n.a.	..	13.5
Other private hospitals	240.7	353.8	384.5	283.2	355.7	380.5	211.0	n.a.	312.3
Public acute & private hospitals ^(g)	1,131.4	1,162.0	1,142.5	1,010.6	1,277.7	1,084.7	1,002.3	993.4	1,136.0
Total	1,207.2	1,169.3	1,303.2	1,094.5	1,365.1	1,222.8	1,002.3	993.4	1,211.7
Total (age-standardised)	1,125.3	1,084.4	1,282.6	1,106.9	1,197.9	1,133.7	1,170.6	1,313.0	1,150.5
Average length of stay (days)									
Public hospitals ^(e)	4.7	4.0	4.5	4.2	4.3	4.9	4.3	3.6	4.4
Public acute hospitals	4.4	4.0	3.7	3.8	4.0	4.2	4.3	3.6	4.0
Public psychiatric hospitals	41.6	22.3	372.4	47.5	30.0	116.0	..	..	62.4
Private hospitals ^(f)	3.0	3.5	3.5	3.3	3.6	3.5	3.7	n.a.	3.3
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	3.7	4.0	3.4	3.8	3.6	3.7	n.a.	3.7
Public acute & private hospitals ^(g)	3.9	3.8	3.7	3.6	3.9	3.9	4.1	3.6	3.8
Total	4.2	3.8	4.2	3.9	4.1	4.4	4.1	3.6	4.1

(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, 1997-98

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Average length of stay, excluding same day separations (days)									
Public hospitals ^(a)	7.2	6.6	7.1	6.6	6.8	8.3	7.4	6.2	7.0
Public acute hospitals	6.6	6.6	5.8	6.0	6.3	6.9	7.4	6.2	6.4
Public psychiatric hospitals	50.2	24.1	379.9	48.2	31.2	119.1	..	..	69.7
Private hospitals ^(b)	5.9	6.4	6.3	5.4	5.8	5.2	5.4	n.a.	6.0
Private free-standing day hospital facilities	..	..	..	..	..	..	..	..	..
Other private hospitals	5.9	6.4	6.3	5.4	5.8	5.2	5.4	n.a.	6.0
Public acute & private hospitals ^(c)	6.5	6.5	5.9	5.8	6.1	6.2	6.8	6.2	6.3
Total	6.9	6.5	6.9	6.3	6.5	7.0	6.8	6.2	6.7

(a) Includes the Department of Veterans' Affairs hospital in New South Wales.

(b) Includes private psychiatric hospitals.

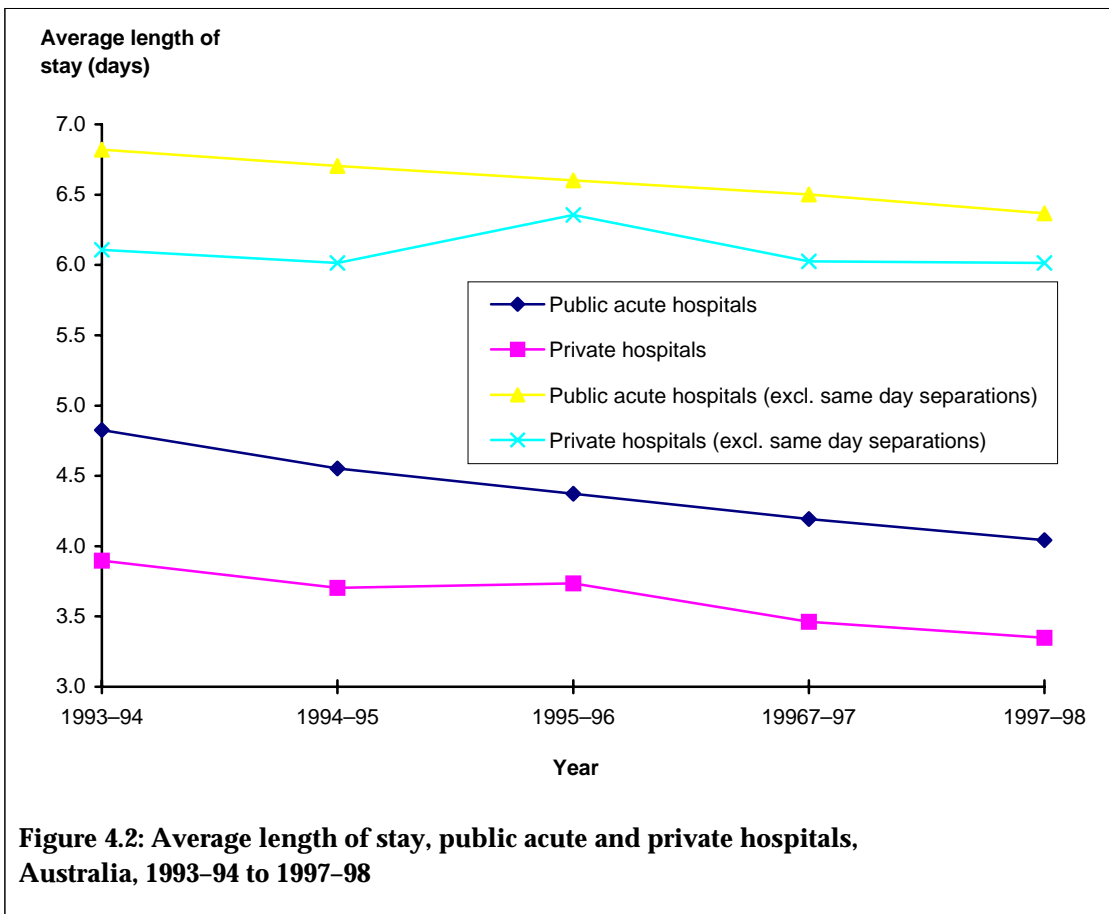
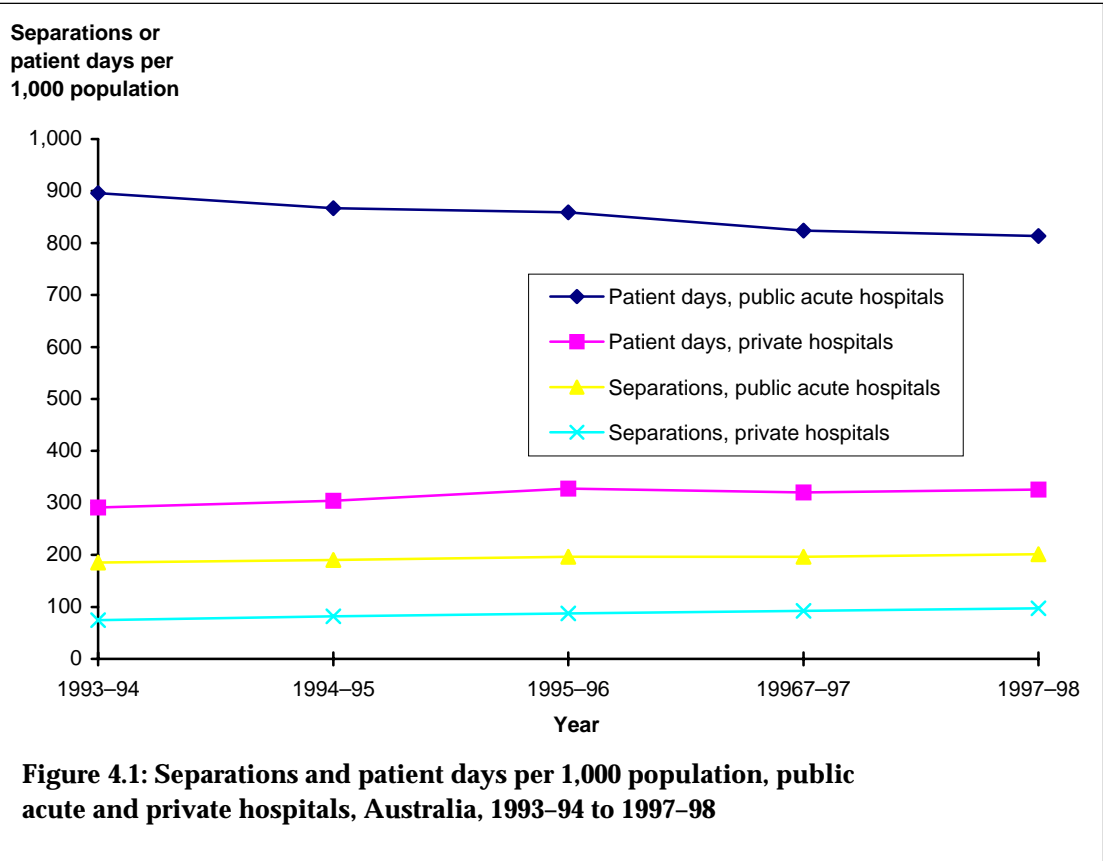
(c) Excludes public psychiatric hospitals.

(d) Figures are crude rates per 1,000 population at 31 December 1997 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.

(e) 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.



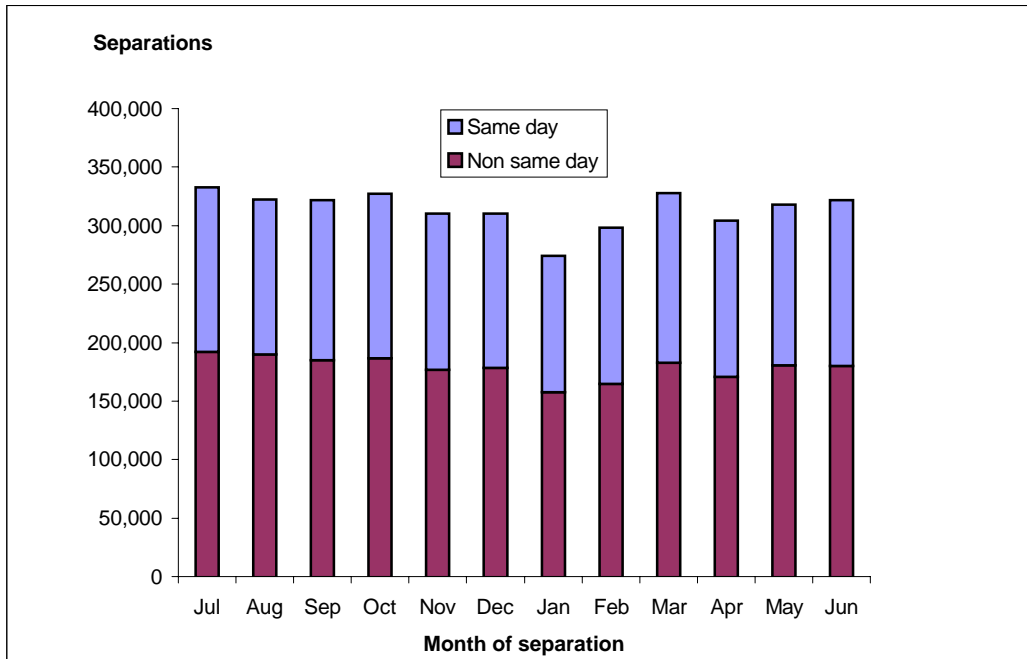


Figure 4.3: Separations by month of separation and length of stay, public hospitals, Australia, 1997-98

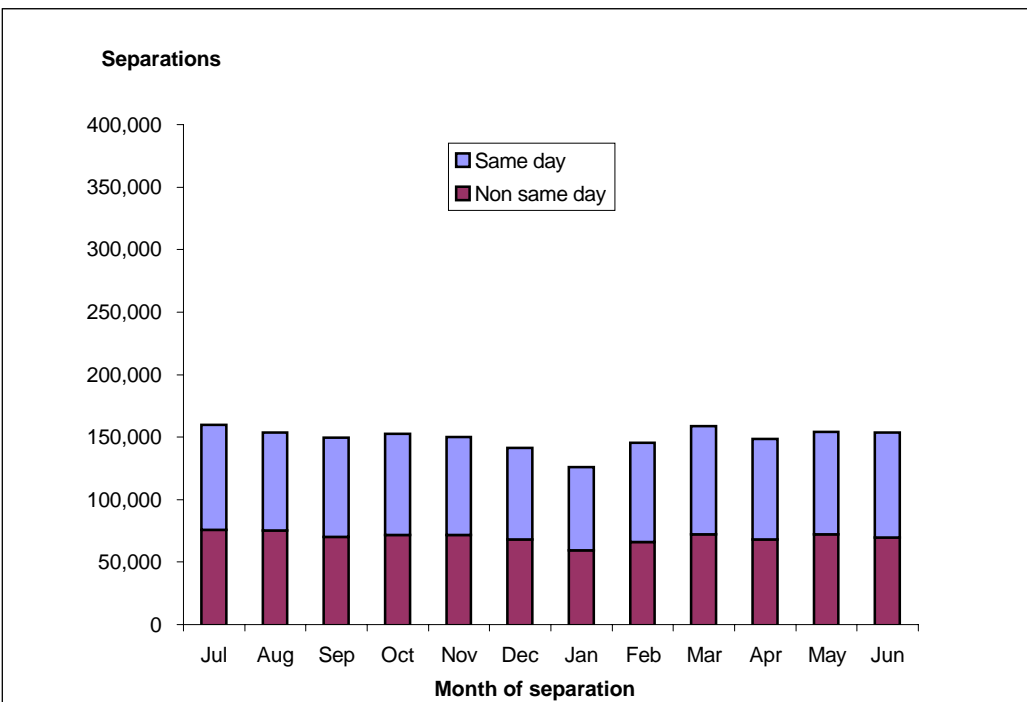


Figure 4.4: Separations by month of separation and length of stay, private hospitals, Australia, 1997-98

Table 4.3: Separations by type of admitted patient episode, public acute and psychiatric hospitals, States and Territories, 1997–98

Type of admitted patient episode	NSW	Vic	Qld	WA	SA	Tas	ACT	NT ^(a)	Total ^(a)
Mental health	44,193	29,484	24,127	15,780	13,001	3,791	1,315	770	132,461
Alcohol & drug	11,347	3,719	5,410	2,712	735	336	54	179	24,492
Nursing home type	5,354	1,841	2,096	125	771	253	70	38	10,548
Rehabilitation	23,953	17,974	8,910	3,005	3,128	891	279	198	58,338
Intellectual handicap	31	35	38	8	15	4	3	n.p.	134
Dental	6,787	7,622	5,871	2,848	2,929	890	540	439	27,926
Non-medical & social	6,235	2,060	2,775	1,128	928	334	38	140	13,638
Dialysis	110,242	105,310	57,870	38,823	26,667	9,356	10,849	17,412	376,529
Endoscopy	49,313	4,122	26,116	15,448	16,595	4,142	2,581	1,164	119,481
Perinatal	14,177	9,545	7,563	2,263	1,863	647	802	1,121	37,981
Medical/surgical/obstetrics	1,001,871	747,158	544,540	264,267	280,122	59,620	41,894	31,273	2,970,745
Total separations	1,273,503	928,870	685,316	346,407	346,754	80,264	58,425	52,734	3,772,273

(a) For the Northern Territory *Intellectual handicap* separations are included in *Rehabilitation* to preserve confidentiality. Hence totals for these rows are not correct.
n.p. not published.

Table 4.4: Patient days by type of admitted patient episode, public acute and psychiatric hospitals, States and Territories, 1997–98

Type of admitted patient episode	NSW	Vic	Qld	WA	SA	Tas	ACT ^(a)	NT ^(b)	Total ^(a)
Mental health	624,620	392,101	603,686	250,623	155,470	44,702	17,219	7,558	2,095,979
Alcohol & drug	85,350	19,287	73,177	20,463	16,829	3,441	242	858	219,647
Nursing home type	712,639	74,147	168,848	24,055	132,119	31,694	2,081	1,559	1,147,142
Rehabilitation	217,892	328,226	66,868	76,348	72,595	16,419	7,818	4,088	790,254
Intellectual handicap	205	167	701	112	78	11	110	n.p.	1,384
Dental	8,518	8,380	7,046	3,380	4,498	982	665	627	34,096
Non-medical & social	53,780	25,022	27,383	8,684	7,256	7,783	23,793	1,489	155,190
Dialysis	110,623	105,526	58,022	38,882	26,709	9,896	10,849	17,433	377,940
Endoscopy	114,964	8,625	57,786	31,292	35,672	8,257	5,698	3,280	265,574
Perinatal	125,405	92,828	65,176	28,696	29,513	7,053	9,079	10,341	368,091
Medical/surgical/obstetrics	4,075,996	2,674,217	1,961,357	978,194	1,004,710	267,807	167,307	141,884	11,271,472
Total patient days	6,129,992	3,728,526	3,090,050	1,460,729	1,485,449	398,045	244,861	189,117	16,726,769

(a) The large increase in *Non-medical & social* patient days in the Australian Capital Territory between 1996–97 and 1997–98 was due a ward closure in one hospital.

(b) For the Northern Territory *Intellectual handicap* patient days are included in *Rehabilitation* to preserve confidentiality. Hence totals for these rows are not correct.
n.p. not published.

Table 4.5: Non-admitted patient occasions of service, by type of non-admitted patient care, public acute and psychiatric hospitals, States and Territories, 1997–98

Type of non-admitted patient care	NSW	Vic	Qld	WA	SA	Tas ^(a)	ACT	NT	Total ^(b)
Public acute hospitals									
Accident & emergency	1,617,047	1,075,473	1,077,455	662,255	455,659	69,907	79,189	101,759	5,138,744
Dialysis	..	..	2,665	..	..	1,976	..	..	4,641
Pathology	1,773,495	618,517	879,737	..	..	88,314	31,690	48,818	3,440,571
Radiology & organ imaging	733,343	466,687	750,291	292,338	291,476	33,700	56,606	58,930	2,683,371
Endoscopy & related procedures	..	..	1,161	..	..	..	..	..	1,161
Other medical/surgical/obstetric	6,150,449	1,310,141	2,020,536	1,483,421	714,022	137,408	169,146	71,784	12,056,907
Mental health	117,025	745,298	129,679	..	20,481	..	3,389	..	1,015,872
Alcohol & drug	..	59,559	78,882	..	..	..	..	..	138,441
Dental	..	188,250	501,316	..	9,643	1,559	..	..	700,768
Pharmacy	432,073	367,128	736,570	..	..	38,668	474	13,693	1,588,606
Allied health	..	988,553	608,822	381,035	418,010	102,154	48,434	14,382	2,561,390
Community health	1,635,014	429,493	106,601	..	..	..	..	..	2,171,108
District nursing	..	454,947	49,112	..	..	..	..	..	504,059
Other outreach	..	52,817	85,802	..	450,918	1,470	8,602	..	599,609
Total services	12,458,446	6,756,863	7,028,629	2,819,049	2,360,209	475,156	397,530	309,366	32,605,248
Group sessions	188,475	41,022	41,597	10,742	179,128	n.a.	7,559	..	468,523
Public psychiatric hospitals									
Emergency & outpatient individual sessions	3,923	n.a.	14,128	n.a.	n.a.	n.a.	..	..	18,051
Emergency & outpatient group sessions	..	n.a.	2,348	n.a.	n.a.	n.a.	..	..	2,348
Outreach/community individual sessions	..	n.a.	136,447	n.a.	n.a.	n.a.	..	..	136,447
Outreach/community group sessions	..	n.a.	2,878	n.a.	n.a.	n.a.	..	..	2,878
Total services	3,923	n.a.	155,801	n.a.	n.a.	n.a.	..	..	159,724

(a) For Tasmania data were only available for the 3 major hospitals.

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

n.a. not available.

.. not applicable.